

**United States Bankruptcy Court  
District of Utah**

In re All Resort Group, Inc. \_\_\_\_\_ Case No. 17-23687  
Debtor(s) Chapter 11 \_\_\_\_\_

**AMENDMENT COVER SHEET**

Amendment(s) to the following petition, list(s), schedule(s) or statement(s) are transmitted herewith:  
**Schedules A/B, D, E/F, G, H, Form 206Summary**

**NOTICE OF AMENDMENT(S) TO AFFECTED PARTIES**

Pursuant to Federal Rule of Bankruptcy Procedure 1009(a), I certify that notice of the filing of the amendment(s) listed above has been given this date to any and all entities affected by the amendment as follows:

Date: May 21, 2017

/s/ Anna W. Drake

**Anna W. Drake A0909**

Attorney for Debtor(s)

**Anna W. Drake, P.C.**

**PO Box 581126**

**Salt Lake City, UT 84158-1126**

**385.258.7025 Fax:801.363.3614**

**annadrake@att.net**

Fill in this information to identify the case:

Debtor name All Resort Group, Inc.

United States Bankruptcy Court for the: DISTRICT OF UTAH

Case number (if known) 17-23687

Check if this is an amended filing

Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING --** Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- Amended Schedule **A/B, D, E/F, G, H, Form 206Summary**
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 21, 2017

X /s/ J.L. Killingsworth

Signature of individual signing on behalf of debtor

J.L. Killingsworth

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name All Resort Group, Inc.

United States Bankruptcy Court for the: DISTRICT OF UTAH

Case number (if known) 17-23687

Check if this is an amended filing

## Official Form 206Sum Summary of Assets and Liabilities for Non-Individuals

12/15

### Part 1: Summary of Assets

#### 1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)

1a. <b>Real property:</b> Copy line 88 from Schedule A/B.....	\$ <u>0.00</u>
1b. <b>Total personal property:</b> Copy line 91A from Schedule A/B.....	\$ <u>12,322,937.52</u>
1c. <b>Total of all property:</b> Copy line 92 from Schedule A/B.....	\$ <u>12,322,937.52</u>

### Part 2: Summary of Liabilities

#### 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of Schedule D..... \$ 7,731,785.62

#### 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

3a. <b>Total claim amounts of priority unsecured claims:</b> Copy the total claims from Part 1 from line 5a of Schedule E/F.....	\$ <u>243,903.51</u>
3b. <b>Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....	+\$ <u>2,391,702.19</u>

#### 4. **Total liabilities** ..... Lines 2 + 3a + 3b

\$ 10,367,391.32

Fill in this information to identify the case:

Debtor name All Resort Group, Inc.

United States Bankruptcy Court for the: DISTRICT OF UTAH

Case number (if known) 17-23687

Check if this is an amended filing

## Official Form 206A/B

### Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

No. Go to Part 2.

Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor			Current value of debtor's interest
3.	<b>Checking, savings, money market, or financial brokerage accounts (Identify all)</b> Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number
3.1.	<u>Mountain West Bank</u>	<u>Checking (All Resort Coach, Inc., dba Lewis States)</u>	<u>4130</u>
			<u>\$31,512.00</u>
3.2.	<u>Mountain West Bank</u>	<u>Checking (Resort Express, Inc., dba All Resort Express)</u>	<u>4092</u>
			<u>\$9,165.00</u>
3.3.	<u>Mountain West Bank</u>	<u>Checking (Lewis Carriages, Inc. ARLV)</u>	<u>4629</u>
			<u>\$2,037.00</u>
3.4.	<u>Mountain West Bank</u>	<u>Checking (Park City Transportation, Inc.)</u>	<u>4114</u>
			<u>\$14,794.00</u>
3.5.	<u>Mountain West Bank</u>	<u>Checking (Resort Express, Inc., dba PC Car Rental)</u>	<u>4203</u>
			<u>\$167.00</u>
3.6.	<u>Mountain West Bank</u>	<u>Checking (Premier Transportation, Inc.)</u>	<u>0925</u>
			<u>\$361.00</u>

Debtor All Resort Group, Inc. \_\_\_\_\_ Case number (*If known*) 17-23687 \_\_\_\_\_  
Name \_\_\_\_\_

3.7. <u>Nevada State Bank</u>	<u>Checking (All Resort Coach, Inc.)</u>	<u>1065</u>	<u>\$770.00</u>
3.8. <u>Bank of America</u>	<u>Checking (All Resort Coach, Inc., dba Lewis Stages)</u>	<u>3272</u>	<u>\$127.02</u>
3.9. <u>Wells Fargo Bank</u>	<u>Checking (All Resort Express and Car Rental)</u>	<u>6841</u>	<u>\$700.00</u>
3.10. <u>Bank of America</u>	<u>Checking (Lewis Carriage, Inc., dba All Resort Las Vegas)</u>	<u>3285</u>	<u>\$6,106.49</u>

4. Other cash equivalents (*Identify all*)

5. Total of Part 1.

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$65,739.51

**Part 2: Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

No. Go to Part 3.  
 Yes Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1. <u>Deposit with Hincklease pursuant to Control Agreement</u>	<u>\$150,000.00</u>
7.2. <u>E.W. Hunt: Security deposit for 5663 Oslo Lane, park City, UT 84098</u>	<u>\$3,500.00</u>
7.3. <u>CV PropCo, LLC: Security deposit for 4740 S Valley View Blvd (Arena Conference Center), Las Vegas, NV</u>	<u>\$13,728.30</u>
7.4. <u>Donna and Karl Larsen: Security deposit for 5428 W Leo Park Rd, West Jordan, UT 84088</u>	<u>\$5,000.00</u>
7.5. <u>Deposit with Salt Lake City Corporation, c/o Airport Contracts &amp; Proc. Mgr., for (2) airport booths at SLC International Airport (Premier Transportation)</u>	<u>\$8,175.00</u>
7.6. <u>Deposit with Salt Lake City Corporation, c/o Airport Contracts &amp; Proc. Mgr., for (2) airport booths at SLC International Airport (PC Transportation)</u>	<u>\$9,175.00</u>
7.7. <u>Deposit with Salt Lake City Corporation, c/o Airport Contracts &amp; Proc. Mgr., for (2) airport booths at SLC International Airport (Resort Express)</u>	<u>\$10,825.00</u>

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8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**  
Description, including name of holder of prepayment

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$200,403.30

**Part 3: Accounts receivable**

10. Does the debtor have any accounts receivable?

No. Go to Part 4.

Yes Fill in the information below.

See attached "SCHEDULE 11"

11. **Accounts receivable**

11a. 90 days old or less:	<u>841,780.64</u>	-	<u>1,950.00</u>	= ....	<u>\$839,830.64</u>
	face amount		doubtful or uncollectible accounts		

11b. Over 90 days old:	<u>260,651.51</u>	-	<u>106,531.58</u>	=....	<u>\$154,119.93</u>
	face amount		doubtful or uncollectible accounts		

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$993,950.57

**Part 4: Investments**

13. Does the debtor own any investments?

No. Go to Part 5.

Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

No. Go to Part 6.

Yes Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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19. **Raw materials**

20. **Work in progress**

21. **Finished goods, including goods held for resale**

22. **Other inventory or supplies**

<u>Parts inventory</u>	<u>Unknown</u>	<u>\$0.00</u>
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23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$0.00

24. **Is any of the property listed in Part 5 perishable?**

No

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Name \_\_\_\_\_

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Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

No

Yes. Book value \_\_\_\_\_

Valuation method \_\_\_\_\_

Current Value \_\_\_\_\_

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

No

Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

No. Go to Part 7.

Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

No. Go to Part 8.

Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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39. Office furniture

See attached SCHEDULE "OFFICE EQUIPMENT, FURNISHINGS, FIXTURES & SUPPLIES, AND MACHINERY"

\$135,052.94

Replacement

\$59,215.50

40. Office fixtures

See attached SCHEDULE "OFFICE EQUIPMENT, FURNISHINGS, FIXTURES & SUPPLIES, AND MACHINERY"

\$0.00

\$0.00

41. Office equipment, including all computer equipment and communication systems equipment and software

See attached SCHEDULE "OFFICE EQUIPMENT, FURNISHINGS, FIXTURES & SUPPLIES, AND MACHINERY"

\$483,664.00

Replacement

\$169,633.32

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$228,848.82

44. Is a depreciation schedule available for any of the property listed in Part 7?

No

Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

No

Yes

Debtor All Resort Group, Inc.  
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**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

No. Go to Part 9.  
 Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------	--------------------------------------------	---------------------------------------

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1. See attached "VEHICLE FLEET LIST" "VEHICLES - NO DEBT" (pages 1 & 2)	\$0.00	Comparable sale	\$1,728,515.00
47.2. See attached "VEHICLE FLEET LIST" "VEHICLES - LOANS" (pages 3, 4, 5 & 6)	\$0.00	Comparable sale	\$1,874,364.74
47.3. See attached "VEHICLE FLEET LIST" "VEHICLES - HYBRID LEASING (BUS FINANCING)" (page 9)	\$0.00	Comparable sale	\$6,511,933.35
47.4. See attached "VEHICLE FLEET LIST" "VEHICLES - LEASES or LOANS" (pages 10 & 11)	\$0.00	Comparable sale	\$687,730.00

48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. Aircraft and accessories

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)  
See attached SCHEDULE "OFFICE EQUIPMENT, FURNISHINGS, FIXTURES & SUPPLIES, AND MACHINERY"

\$95,295.00	Replacement	\$31,452.23
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51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$10,833,995.32
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52. Is a depreciation schedule available for any of the property listed in Part 8?

No  
 Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

No  
 Yes

**Part 9: Real property**

54. Does the debtor own or lease any real property?

No. Go to Part 10.  
 Yes Fill in the information below.

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**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

No. Go to Part 11.  
 Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	----------------------------------------------------------	-----------------------------------------	------------------------------------

60. Patents, copyrights, trademarks, and trade secrets

61. Internet domain names and websites

62. Licenses, franchises, and royalties

63. Customer lists, mailing lists, or other compilations

<u>Customer and affiliate lists (protected)</u>	<u>Unknown</u>	<u>N/A</u>	<u>Unknown</u>
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64. Other intangibles, or intellectual property

65. Goodwill

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

No  
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

No  
 Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

No  
 Yes

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

No. Go to Part 12.  
 Yes Fill in the information below.

Current value of debtor's interest
------------------------------------

71. Notes receivable

Description (include name of obligor)

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

73. Interests in insurance policies or annuities

74. Causes of action against third parties (whether or not a lawsuit has been filed)

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to

Debtor All Resort Group, Inc.  
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**set off claims**

**TO BE SUPPLIED**

**Unknown**

**Nature of claim**

**Amount requested**

**\$0.00**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** Examples: Season tickets,  
country club membership

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

**\$0.00**

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

No  
 Yes

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Part 12: **Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$65,739.51</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$200,403.30</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$993,950.57</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$228,848.82</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$10,833,995.32</u>	
88. Real property. <i>Copy line 56, Part 9.....&gt;</i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$12,322,937.52</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$12,322,937.52</u>

## ACCOUNTS RECEIVABLE

<b>Division</b>	<b>Inv Amount</b>	<b>Current</b>	<b>0-30</b>	<b>31-60</b>	<b>61-90</b>	<b>91-120+</b>
ARE	1,823.98		1,823.98			
ARE	22,200.21	22,200.21				
ARE	50.00		50.00			
ARE	139.00	139.00				
ARE	61.40			61.40		
ARE	31,738.46	31,738.46				
ARE	176.95	176.95				
ARE	59,521.43	59,521.43				
ARE	66,650.16	66,650.16				
ARE	36.00			36.00		
ARE	383.51					383.51
ARE	319.00			319.00		
ARE	68.25	68.25				
ARE	11,342.00	11,342.00				
ARE	1,321.00	1,321.00				
ARE	1,125.42	1,125.42				
ARE	989.65	989.65				
ARE	280.45		280.45			
ARE	2,465.88	2,465.88				
ARE	758.40	758.40				
ARE	3,063.25		3,063.25			
ARE	109.60	109.60				
ARE	79.20					79.20
ARE	477.00		477.00			
ARE	38,077.11			38,077.11		
ARE	2,755.20				2,755.20	
ARE	5,663.80				5,663.80	
ARE	50.50			50.50		
ARE	70.20		70.20			
ARE	70.20	70.20				
ARE	613.60				613.60	
ARE	1,180.40			1,180.40		
ARE	4,920.00	4,920.00				
ARE	344.90		344.90			
ARE	299.59	299.59				
ARE	637.45	637.45				
ARE	650.60	650.60				
ARE	1,006.50					1,006.50
ARE	91.50	91.50				
ARE	20,047.50		20,047.50			
ARE	250.00	250.00				

## ACCOUNTS RECEIVABLE

<b>Division</b>	<b>Inv Amount</b>	<b>Current</b>	<b>0-30</b>	<b>31-60</b>	<b>61-90</b>	<b>91-120+</b>
ARE	32,088.50	32,088.50				
ARE	1,262.90	1,262.90				
ARE	7,875.45	7,875.45				
ARE	18,390.50		18,390.50			
ARE	1,500.80			1,500.80		
ARE	116.60				116.60	
ARE	85.20		85.20			
ARE	335.60	335.60				
ARE	202.20				202.20	
ARE	289.40				289.40	
ARE	70.20				70.20	
ARE	109.60				109.60	
ARE	341.20	341.20				
ARE	13,117.00				13,117.00	
ARE	4,937.00				4,937.00	
ARE	1,762.83				1,762.83	
ARE	20,789.40		20,789.40			
ARE	7,987.80		7,987.80			
ARE	13,845.40		13,845.40			
ARE	641.80				641.80	
ARE	823.40		823.40			
ARE	210.60		210.60			
ARE	54.80				54.80	
ARE	94.20				94.20	
ARE	152.20				152.20	
ARE	137.20		137.20			
ARE	440.00				440.00	
ARE	440.00		440.00			
ARE	3,795.50				3,795.50	
ARE	588.00	588.00				
ARE	194.80				194.80	
ARE	4,354.61				4,354.61	
ARE	4,728.93	4,728.93				
ARE	241.40				241.40	
ARE	200.00	200.00				
ARE	126.12		126.12			
ARE	262.50	262.50				
ARE	31.40				31.40	
ARE	172.20					172.20
ARE	384.50					384.50
ARE	76.90					76.90

## ACCOUNTS RECEIVABLE

<b>Division</b>	<b>Inv Amount</b>	<b>Current</b>	<b>0-30</b>	<b>31-60</b>	<b>61-90</b>	<b>91-120+</b>
ARE	76.90					76.90
ARE	1,772.88					1,772.88
ARE	62.80	62.80				
ARE	7,727.31					7,727.31
ARE	186.40					186.40
ARE	409.80			409.80		
ARE	258.60		258.60			
ARE	191.60				191.60	
ARE	520.60			520.60		
ARE	8,252.12		8,252.12			
ARE	295.00		295.00			
ARE	421.00	421.00				
ARE	6,458.84	6,458.84				
ARE	5,373.50			5,373.50		
ARE	44.70					44.70
ARE	44.70					44.70
ARE	35.96					35.96
ARE	80.66			80.66		
ARE	158.44	158.44				
ARE	68,867.47			68,867.47		
ARE	145.00			145.00		
ARE	1,045.00	1,045.00				
ARE	85.60					85.60
ARE	775.40					775.40
ARE	1,366.16					1,366.16
ARE	62.80					62.80
ARE	311.60				311.60	
ARE	70.20			70.20		
ARE	1,028.40			1,028.40		
ARE	1,857.40		1,857.40			
ARE	4,401.40	4,401.40				
ARE	13,733.80	13,733.80				
ARE	12,604.40	12,604.40				
ARE	7,149.20	7,149.20				
ARE	2,768.40	2,768.40				
ARE	40.60			40.60		
ARE	160.00					160.00
ARE	1,332.80					1,332.80
ARE	46.60			46.60		
ARE	4,943.25	4,943.25				
ARE	878.80	878.80				

ACCOUNTS RECEIVABLE

<b>Division</b>	<b>Inv Amount</b>	<b>Current</b>	<b>0-30</b>	<b>31-60</b>	<b>61-90</b>	<b>91-120+</b>
ARE	126.00					126.00
ARE	82.00					82.00
ARE	52.00				52.00	
ARE	182.40	182.40				
ARE	137.20				137.20	
ARE	31.40			31.40		
ARE	248.96		248.96			
ARE	615.80		615.80			
ARE	626.40	626.40				
ARE	192.00	192.00				
<b>Subtotal</b>	<b>584,459.64</b>	<b>308,834.96</b>	<b>102,021.58</b>	<b>146,944.18</b>	<b>9,760.96</b>	<b>15,946.46</b>

<b>Division</b>	<b>Inv Amount</b>	<b>Current</b>	<b>0-30</b>	<b>31-60</b>	<b>61-90</b>	<b>91-120+</b>
PCT	6,172.00		6,172.00			
PCT	45.60		45.60			
PCT	351.00		351.00			
PCT	230.00				230.00	
PCT	230.00			230.00		
PCT	7,424.60		7,424.60			
PCT	2,081.60		2,081.60			
PCT	1,742.20	1,742.20				
PCT	1,190.00					1,190.00
PCT	252.00		252.00			
PCT	4,487.28			4,487.28		
PCT	5,707.75		5,707.75			
PCT	5,409.00	5,409.00				
PCT	3,957.50	3,957.50				
PCT	250.20				250.20	
PCT	706.80		706.80			
PCT	1,065.60	1,065.60				
PCT	2,414.92	2,414.92				
PCT	586.00		586.00			
PCT	31.40	31.40				
PCT	387.20				387.20	
PCT	327.20				327.20	
PCT	407.00			407.00		
PCT	566.40		566.40			
PCT	109.60		109.60			
PCT	617.40	617.40				

## ACCOUNTS RECEIVABLE

<b>Division</b>	<b>Inv Amount</b>	<b>Current</b>	<b>0-30</b>	<b>31-60</b>	<b>61-90</b>	<b>91-120+</b>
PCT	10,802.37		10,802.37			
PCT	300.09	300.09				
PCT	470.00				470.00	
PCT	767.00	767.00				
PCT	1,237.80	1,237.80				
PCT	1,896.35					1,896.35
PCT	169.23			169.23		
PCT	535.43			535.43		
PCT	557.30		557.30			
PCT	47,976.25	47,976.25				
PCT	60,445.74	60,445.74				
PCT	652.10					652.10
PCT	2,167.73		2,167.73			
PCT	4,238.66	4,238.66				
PCT	2,227.56	2,227.56				
PCT	4,249.49	4,249.49				
PCT	40.00	40.00				
PCT	555.80	555.80				
PCT	66.00				66.00	
PCT	54.80		54.80			
PCT	136.00	136.00				
PCT	14,779.60		14,779.60			
PCT	10,987.84	10,987.84				
PCT	9,158.40	9,158.40				
PCT	6,780.80		6,780.80			
PCT	8,009.60	8,009.60				
PCT	10,378.60	10,378.60				
PCT	103.20				103.20	
PCT	379.22	379.22				
PCT	404.40		404.40			
PCT	3,955.00			3,955.00		
PCT	4,305.00			4,305.00		
PCT	45.00		45.00			
PCT	595.00		595.00			
PCT	700.00		700.00			
PCT	490.00		490.00			
PCT	1,785.00		1,785.00			
PCT	980.00		980.00			
PCT	280.00		280.00			
PCT	62.80					62.80
PCT	191.00					191.00

ACCOUNTS RECEIVABLE

Division	Inv Amount	Current	0-30	31-60	61-90	91-120+
PCT	226.00				226.00	
PCT	157.00				157.00	
PCT	117.60				117.60	
PCT	31.40				31.40	
PCT	468.20				468.20	
PCT	297.60				297.60	
PCT	1,944.60				1,944.60	
PCT	8,102.20		8,102.20			
PCT	5,250.40	5,250.40				
PCT	8,150.20				8,150.20	
PCT	153.20				153.20	
<b>Subtotal</b>	<b>285,693.31</b>	<b>181,576.47</b>	<b>72,527.55</b>	<b>14,088.94</b>	<b>4,076.00</b>	<b>13,424.35</b>
<b>TOTAL</b>	<b>870,152.95</b>	<b>490,411.43</b>	<b>174,549.13</b>	<b>161,033.12</b>	<b>13,836.96</b>	<b>29,370.81</b>
				<b>TOTAL LESS THAN 90 DAYS</b>	<b>839,830.64</b>	

**SCHEDULE B  
PERSONAL PROPERTY**

<b>ARC Description</b>	<b>Last 5 VIN</b>	<b>Asset No.</b>	<b>NP#</b>	<b>Date Acquired</b>	<b>Balance 12/31/2015</b>	<b>FMV</b>
<b><u>Shop Equipment</u></b>						
Fuel Pumps		6		10/01/06	18,278	4,569.50
Saftey Nets		17		12/01/06	3,646	911.50
Fuel Pumps		18		02/01/07	4,946	1,236.50
Fuel Pumps		20		04/01/07	3,592	898.00
Bus Lift				02/29/12	39,500	15,800.00
Bus Cleaner				05/30/14	8,500	4,250.00
A/C Compressor				08/27/15	1,401	700.53
<b>Total Shop Equipment</b>					<b>79,863</b>	<b>28,366.03</b>
<b><u>Furniture &amp; Fixtures, Ops</u></b>						
Furniture & Fixtures - Dispatch		19		03/01/07	3,300	990.00
Furniture & Fixtures - Dispatch				05/31/13	11,288	6,772.71
Furniture & Fixtures - Dispatch				09/30/13	1,491	894.34
Total Furniture & Fixtures - Ops					<b>16,078</b>	<b>8,657.05</b>
<b><u>Furniture &amp; Fixtures, G&amp;A</u></b>						
Furniture		4		07/01/06	16,427	3,285.40
Furniture		5		08/01/06	533	106.60
Furniture (Sales Dept.)		24		04/03/08	2,833	708.25
Furniture				03/31/13	1,117	558.29
Furniture				08/31/13	11,380	5,689.77
Total Furniture & Fixtures - G&A					<b>32,289</b>	<b>10,348.31</b>

**SCHEDULE B  
PERSONAL PROPERTY**

<b>Description</b>	<b>VIN</b>	<b>No.</b>	<b>NP#</b>	<b>Acquired</b>	<b>12/31/2015</b>
<b><u>Computers &amp; Software</u></b>					
Computers		7		04/01/06	2,123 25.00
Computers		8		07/01/06	653 25.00
Computers		9		08/01/06	415 25.00
Computers		10		07/31/06	1,311 25.00
Computers		11		09/01/06	6,618 25.00
Computers		12		02/01/06	600 25.00
Computers		13		02/01/06	3,000 25.00
Computers		14		02/01/06	3,000 25.00
Computers		15		03/01/06	2,000 25.00
Computers		16		04/01/06	9,232 25.00
Computers		22		10/01/07	5,480 25.00
Computers		23		04/01/08	11,270 100.00
Saucom		24		03/10/14	30,725 15,362.50
		25		06/01/14	19,810 9,905.00
Saucon GPS onboard computer drive and display kit (Lewis SLC)				06/09/15	1,950 1,462.50
Saucon GPS onboard computer drive and display kit (Lewis LV)				06/09/15	1,950 1,462.50
<b>Total Computers &amp; Software</b>				<b>100,137</b>	<b>28,567.50</b>
<b><u>Office Equipment</u></b>					
Telephone System		3		06/01/06	9,098 3,639.22
<b>Total Office Equipment</b>				<b>9,098</b>	<b>51,212.08</b>

**SCHEDULE B  
PERSONAL PROPERTY**

<b>Description</b>	<b>VIN</b>	<b>No.</b>	<b>NP#</b>	<b>Acquired</b>	<b>12/31/2015</b>
<b>REI</b>	<b>Last 5</b>	<b>Asset</b>		<b>Date Acquired</b>	<b>Balance 1/1/2016</b>
<b>Description</b>	<b>VIN</b>	<b>No.</b>	<b>NP #</b>		
<b><u>Shop Equipment</u></b>					
Tool Chest 04		63		7/1/2004	831.00 166.20
Equipment 1		73		7/1/2005	2,010.00 402.00
Equipment 2		74		7/1/2005	11,225.00 2,245.00
Vending Machines		88		7/1/2005	1,365.00 273.00
<b>Total Shop Equipment</b>				<b>15,431.00</b>	<b>3,086.20</b>
<b><u>Furniture &amp; Fixtures, G&amp;A</u></b>					
AMX New Furniture		44		7/1/2005	2,939.00 440.85
Furniture & Fixtures 1		45		7/1/2005	7,245.00 1,086.75
Furniture & Fixtures 2		46		7/1/2005	2,267.00 340.05
Furniture & Fixtures 3		47		7/1/2005	13,902.00 3,475.50
Furniture & Fixtures 4		48		7/1/2005	680.00 102.00
Furniture & Fixtures 5		49		7/1/2005	521.00 78.15
Furniture & Fixtures 6		50		7/1/2005	1,760.00 264.00
Furniture		120		7/1/2012	36,384.00 21,830.40
Furniture				07/01/12	20,223.42 12,134.05
Furniture				3/31/2013	764.00 458.40
<b>Total Furniture &amp; Fixtures - G&amp;A</b>				<b>86,685.42</b>	<b>40,210.15</b>
<b><u>Computers &amp; Software</u></b>					
Dell Server 1		53		7/1/2004	4,171.00 834.20
Dell Server 2		54		7/1/2004	2,456.00 491.20
Flat Screens 2004		56		7/1/2004	2,226.00 445.20
Laptop 2004		57		7/1/2004	2,445.00 489.00
Laptop 04		58		7/1/2004	2,200.00 440.00
PDA		60		7/1/2004	333.00 66.60
Princeton Monitor		62		7/1/2004	898.00 179.60
Computer '05		64		7/1/2005	722.00 144.40
Dell 17 inch Monitor		65		7/1/2005	718.00 143.60
Dell 17 inch Monitor (2)		66		7/1/2005	1,048.00 209.60
Hudson System		68		7/1/2005	3,090.00 618.00
Laptop 2005 #1		69		7/1/2005	938.00 187.60
Laptop 2005 #2		70		7/1/2005	1,083.00 216.60
AMX Software Purchase		89		7/1/2005	2,405.00 481.00
Computer		90		7/1/2005	985.00 197.00
Computer Equipment 1		91		7/1/2005	26,763.00 5,352.60

#FMV Assets (awd 05.19.17)

Schedule B Personal Property

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Schedules 39, 40, 41, 50

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**SCHEDULE B  
PERSONAL PROPERTY**

Description	VIN	No.	NP#	Acquired	12/31/2015
Computer Equipment 2		92		7/1/2005	26,869.00
Computer Equipment 3		93		7/1/2005	2,342.00
Computer Equipment 4		94		7/1/2005	5,699.00
Computer Equipment 5		95		7/1/2005	2,000.00
Computer Equipment 6		96		7/1/2005	10,000.00
Computer Equipment 7		97		7/1/2005	1,256.00
Computer Equipment 8		98		7/1/2005	6,829.00
Computer Equipment 9		99		7/1/2005	1,000.00
Computer Equipment 10		100		7/1/2005	1,000.00
Computer Equipment 11		101		7/1/2005	2,063.00
Computer Hardware		102		7/1/2005	2,987.00
Computer Hardware 02		103		7/1/2005	8,125.00
Laptop		104		7/1/2005	2,000.00
Laptop - Mike Par		105		7/1/2005	2,000.00
Printer/Fax		106		7/1/2005	3,200.00
Computers		4		7/1/2006	4,283.09
Computer		14		7/1/2008	3,931.01
Computer		15		7/1/2008	3,931.01
Computer		16		7/1/2008	3,198.27
Great Plains Accounting Software		26		12/1/2011	51,204.00
Computers		121		7/1/2012	8,511.97
Software				07/01/12	6,164.52
<b>Total Computers &amp; Software</b>					<b>211,074.87</b>
					<b>56,490.05</b>

**Office Equipment**

Furniture 18	43	7/1/2005	1,500.00	300.00
New Office Equipment	51	7/1/2005	3,000.00	600.00
Compressor	52	7/1/2004	2,065.00	413.00
Dell Ultra Sharp/Axiom	55	7/1/2004	1,205.00	241.00
Lift Equipment	59	7/1/2004	4,785.00	957.00
Powerwasher 2004	61	7/1/2004	4,658.00	931.60
File Server 2005	67	7/1/2005	1,358.00	271.60
Polycom 2200-16200-001	71	7/1/2005	530.00	106.00
Comp Signs RA	72	7/1/2005	7,571.00	1,514.20
Office Equipment 10	75	7/1/2005	7,400.00	1,480.00
Office Equipment 11	76	7/1/2005	8,873.00	1,774.60
Office Equipment 12	77	7/1/2005	1,000.00	200.00
Office Equipment 4	78	7/1/2005	2,838.00	567.60
Office Equipment 5	79	7/1/2005	17,500.00	3,500.00

#FMV Assets (awd 05.19.17)

Schedule B Personal Property

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**Schedules 39, 40, 41, 50**

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**SCHEDULE B  
PERSONAL PROPERTY**

<b>Description</b>	<b>VIN</b>	<b>No.</b>	<b>NP#</b>	<b>Acquired</b>	<b>12/31/2015</b>
Office Equipment 6		80		7/1/2005	20,751.00 4,150.20
Office Equipment 7		81		7/1/2005	8,931.00 1,786.20
Office Equipment 8		82		7/1/2005	1,250.00 250.00
Office Equipment 9		83		7/1/2005	851.00 170.20
Radios		84		7/1/2005	45,133.00 9,026.60
Rocky Mountain Telephone		85		7/1/2005	2,509.00 501.80
Telephone Equipment 13		86		7/1/2005	1,492.00 298.40
Telephone Equipment 13		87		7/1/2005	3,573.00 714.60
New Office Equipment		5		7/1/2006	7,652.00 1,530.40
Office Desks New Life		18		7/1/2009	6,928.97 2,078.69
<b>Total Office Equipment</b>				<b>163,353.97</b>	<b>33,363.69</b>
<b>Total Office Furniture</b>				<b>135,052.94</b>	<b>59,215.50</b>
<b>Total Office Fixtures</b>				<b>included</b>	<b>included</b>
<b>Total Office Equipment &amp; Computers</b>				<b>483,664</b>	<b>169,633.32</b>
<b>Total Machinery &amp; Equipment</b>				<b>95,294</b>	<b>31,452.23</b>
<b>TOTAL</b>				<b>714,010.90</b>	<b>260,301.05</b>

**VEHICLE FLEET LIST**

Year	Model	VIN	Finance Company	Lease or Loan	Lease or Loan Number	Monthly Rate	Amount Owed	FMV
2012	TURTLE TOP	1FDWE3FSOBD73560	Paid Off					Unknown
2012	TURTLE TOP	1FDWE3FSOBD73561	Paid Off					Unknown
2011	Ford E350 SD XLT 15 PS	1FBSS3BL7BDA33976	Paid Off					8,124.00
2011	Ford Flex SE Sport Utility 4D	2FMHK6DT6BBD20844	Paid Off					4,791.00
2010	Cadillac Escalade Hybrid Sport Utility 4D	1GYUKEEJXAR122334	Paid Off					11,438.00
2010	Chevrolet Suburban 2500 LT Sport Utility 4D	1GNUKJE38AR111047	Paid Off					7,467.00
2010	Glaval Ford	1FDFE4FS5ADA12789	Paid Off					Unknown
2009	Cadillac Escalade Hybrid Sport Utility 4D	1GYFK43529R135826	Paid Off					9,406.00
2009	J4500	2MG3JMEA49W065379	Paid Off					235,600.00
2008	Chrysler Aspen	1A8HW58N68F119901	Paid Off					4,778.00
2007	J4500	2M93JMDA17W064373	Paid Off					187,100.00
2007	J4500	2M93JMDA37W064374	Paid Off					187,100.00
2007	Krystal International	1HVBTAA67H426295	Paid Off					Unknown
2007	Krystal International	1HVBTAAANX7H358972	Paid Off					Unknown
2006	J4500	2M93JMDA46W063524	Paid Off					165,300.00
2006	J4500	2M93JMDA46W063619	Paid Off					165,300.00
2006	Krystal Ford	1FDXE45P56DA40424	Paid Off					Unknown
2005	Ford F250 Super Duty Regular Cab	Unknown	Paid Off					890.00
2003	Bluebird LTC40	1BABJBXA73F214825	Paid Off					Unknown
2003	Mitsubishi FE649 (Box Truck)	JW6BBF1H53L003053	Paid Off					Unknown
2002	C2145	YE2CC23B122045345	Paid Off					93,400.00
2001	C2145	YE2CC23B912045303	Paid Off					98,200.00
2001	Ford F250 SRW	1FTNW21FO1EA32454	Paid Off					Unknown
2001	Gillig - Low Floor	15GGB221711072148	Paid Off					Unknown
2001	Gillig - Low Floor	15GGB221911072149	Paid Off					Unknown
2001	Gillig - Low Floor	15GGB221511072147	Paid Off					Unknown
2001	H3-41	2PCH33419110141925	Paid Off					43,800.00
2000	C2145	YE2CC13B4Y2045035	Paid Off					74,100.00
2000	E4500	1M8TRMPA9YP060985	Paid Off					57,000.00
2000	E4500	1M8TRMPA4YP060974	Paid Off					57,000.00
2000	E4500	1M8TRMPA0YP061023	Paid Off					57,000.00
2000	E4500	1M8TRMPA9YP061053	Paid Off					91,800.00
1999	Bluebird LTC40	1BABBC9A6XF088506	Paid Off					Unknown

##Updated Fleet List by Category - 05.20.17

Own Free-Clear

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**VEHICLE FLEET LIST**

Year	Model	VIN	Finance Company	Lease or Loan	Lease or Loan Number	Monthly Rate	Amount Owed	FMV
1999	Bluebird LTC40	1BAGBCSA2XF088504	Paid Off					Unknown
1999	E4500	1M8TRMPAOXP060808	Paid Off					47,500.00
1999	Thomas 1999 Skyline Corporation Trailer	L6XGW14413 - check this VIN:	Paid Off					Unknown
1998	El Dorado Transmark	1N9TDHC88WC084231	Paid Off					Unknown
1998	El Dorado Transmark	1N9TDHC87WC084138	Paid Off					Unknown
1997	EL DORADO	1N9TDAC60VC084267	Paid Off					Unknown
1997	Ford F150 Super Cab	1FTEX08L0VKC70177	Paid Off					780.00
914	4x4 Van	Unknown	Paid Off					Unknown
913	4x4 Van	Unknown	Paid Off					Unknown
67	Ram Truck	Unknown	Paid Off					Unknown
<b>TOTAL VALUE</b>								<b>1,607,874.00</b>

##Updated Fleet List by Category - 05.20.17

Own Free-Clear

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**VEHICLES - NO DEBT**

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**VEHICLE FLEET LIST**

Year	Model	VIN	Finance Company	Lease or Loan	Lease or Loan Number	Monthly Rate	Amount Owed	FMV
2011	Chevrolet Suburban 2500	1GNSKJE31BR300809	Ally	Loan	024-9197-26062	648.62	4,483.06	19,501.00
2013	Chevrolet Suburban 2500 LT Sport Utility 4D	1GNSKJE7XDR213013	Ally	Loan	024-9193-40732	819.04	6,462.06	8,378.00
2013	Chevrolet Suburban 2500 LT Sport Utility 4D	1GNSKJE70DR212906	Ally	Loan	024-9201-36375	819.04	6,460.60	8,378.00
2013	Chevrolet Suburban 2500 LT Sport Utility 4D	1GNSKJE74DR212892	Ally	Loan	024-9198-34297	819.04	6,460.60	7,945.00
2013	Chevrolet Suburban 2500 LT Sport Utility 4D	1GNSKJE76DR212876	Ally	Loan	024-9191-38286	819.04	6,711.89	8,883.00
2013	Chevrolet Suburban 2500 LT Sport Utility 4D	1GNSKJE79DR212760	Ally	Loan	024-9191-39592	819.04	6,460.60	8,883.00
2013	Chevrolet Suburban 2500 LT Sport Utility 4D	1GNSKJE75DR212707	Ally	Loan	024-9198-34280	819.04	6,460.71	9,162.00
2014	Chevrolet Traverse LT Sport Utility 4D	1GNKVHKD9EJ282897	Ally	Loan	024-9220-34387	751.87	17,144.69	12,534.00
2015	Ford Transit 350 HD Van Extended Length w/Dual Sliding Side Doors w/10360-lb GVWR Van 4D	1FBVU4XG2FKA14018	Ally	Loan	024-9227-25931	742.51	21,345.00	14,901.00
2014	Kia Sorento EX Sport Utility 4D	5XYKUDA74EG447822	Ally	Loan	611-9210-16865	429.72	11,830.43	13,187.00
2012	Kia Sorento Sport Utility 4D	5XYKUD29DG332751	Ally	Loan	024-9188-71549	572.23	1,715.91	5,198.00
2014	Thomas Built Bus HDX	1T7YU2F28E1167528	Daimler-Mercedes Benz Financial Services	Loan	100-0242792-001	3,712.46	58,439.46	Unknown

##Updated Fleet List by Category - 05.20.17

Loans

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**VEHICLE FLEET LIST**

Year	Model	VIN	Finance Company	Lease or Loan	Lease or Loan Number	Monthly Rate	Amount Owed	FMV
2014	Thomas Built Bus HDX	1T7YU2F26E1167530	Daimler-Mercedes Benz Financial Services	Loan	100-0242792-001	3,712.46	58,439.46	Unknown
2014	Thomas Built Bus HDX	1T7YU2F28E1167531	Daimler-Mercedes Benz Financial Services	Loan	100-0242792-001	3,712.46	58,439.46	Unknown
2014	Thomas Built Bus HDX	1T7YU2F2XE1167529	Daimler-Mercedes Benz Financial Services	Loan	100-0242792-001	3,712.46	58,439.46	Unknown
2014	Thomas Built Bus HDX	1T7YU2F2XE1167529	Daimler-Mercedes Benz Financial Services	Loan	100-0242792-001	3,712.46	58,439.46	Unknown
2008	Thomas Built Bus SAF-T-Liner HDX	1T7YU2F2381290075	Daimler-Mercedes Benz Financial Services	Loan	100-0237795-001	1,417.30	17,834.67	Unknown
2008	Thomas Built Bus SAF-T-Liner HDX	1T7YU2F2581290076	Daimler-Mercedes Benz Financial Services	Loan	100-0237795-001	1,417.30	17,834.67	Unknown
2008	Thomas Built Bus SAF-T-Liner HDX	1T7YU2F2781290077	Daimler-Mercedes Benz Financial Services	Loan	100-0237795-001	1,417.30	17,834.67	Unknown
2008	Thomas Built Bus SAF-T-Liner HDX	1T7YU2F2981290078	Daimler-Mercedes Benz Financial Services	Loan	100-0237795-001	1,417.30	17,834.67	Unknown
2008	Thomas Built Bus SAF-T-Liner HDX	1T7YU2F2081290079	Daimler-Mercedes Benz Financial Services	Loan	100-0237795-001	1,417.30	17,834.67	Unknown
2016	Cadillac CT6 3.0 Twin Turbo Luxury Sedan 4D	1G6KK5R66GU154855	Jerry Seiner Chevrolet Inc. / GM Financial	Loan	2.11E+11	1,265.67	59,000.00	35,510.00
2013	LINCOLN MKT	2LMHJ5NKODBL59120	Lincoln/Ford Credit	Loan	48787350	1,014.73	Unknown	4,203.00
2013	LINCOLN MKT	2LMHJ5NKODBL59121	Lincoln/Ford Credit	Loan	48787328	1,014.73	Unknown	4,203.00
2002	30' Eldorado EX Rider Transit Bus	1N9TDAC892C084166	Signature Financial	Loan	103870-4166	551.26	Unknown	Unknown

##Updated Fleet List by Category - 05.20.17

Loans

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**VEHICLE FLEET LIST**

Year	Model	VIN	Finance Company	Lease or Loan	Lease or Loan Number	Monthly Rate	Amount Owed	FMV
2002	30' Eldorado EX Rider Transit Bus	1N9TDAC852C084164	Signature Financial	Loan	103870-4164	1,463.12	Unknown	Unknown
2002	30' Eldorado EX Rider Transit Bus	1N9TDAC842C084169	Signature Financial	Loan	103870-4169	551.26	Unknown	Unknown
2002	30' Eldorado EX Rider Transit Bus	1N9TDAC822C084171	Signature Financial	Loan	103870-4171	219.67	Unknown	Unknown
2000	30' Gillig Phantom Transit Bus	15GCA181XY1110378	Signature Financial	Loan	103870-0378	1,463.12	Unknown	Unknown
2000	30' Gillig Phantom Transit Bus	15GCA1811Y1110379	Signature Financial	Loan	103870-0379	1,695.23	Unknown	Unknown
2000	30' Gillig Phantom Transit Bus	15GCA1818Y1110380	Signature Financial	Loan	103870-0380	1,695.23	Unknown	Unknown
2000	30' Gillig Phantom Transit Bus	15GCA1814Y1110375	Signature Financial	Loan	103870-0375	1,463.12	Unknown	Unknown
2000	30' Gillig Phantom Transit Bus	15GCA1816Y1110376	Signature Financial	Loan	103870-0376	1,463.12	Unknown	Unknown
2000	30' Gillig Phantom Transit Bus	15GCA1818Y1110377	Signature Financial	Loan	103870-0377	1,463.12	Unknown	Unknown
2000	40' Gillig Phantom Transit Bus	15GCD211XY1110167	Signature Financial	Loan	103870-0167	1,463.12	Unknown	Unknown
2000	40' Gillig Phantom Transit Bus	15GCD2111Y1110168	Signature Financial	Loan	103870-0168	1,463.12	Unknown	Unknown
2011	GCA Freightliner	4UZACPCT3BCAZ8443	Sun Trust	Loan	443-7009108-001	3,321.78	Unknown	Unknown
2015	Chevrolet Suburban LT	1GNSKJKC5FR530332	Wells Fargo	Loan	200-0453572-700	1,279.67	25,946.59	33,102.00
2015	Chevrolet Suburban LT	1GNSKJKCXFR506446	Wells Fargo	Loan	200-0453572-700	1,279.67	25,946.59	33,777.00
2015	Chevrolet Suburban LT	1GNSKJKC5FR527253	Wells Fargo	Loan	200-0453572-700	1,279.67	25,946.59	35,008.00
2014	FORD E350 SD XLT	1FMNE3BLXEDA61609	Wells Fargo	Loan	001-0460535-700	746.67	18,650.08	5,597.00
2014	FORD E350 SD XLT	1FMNE3BL5EDA61601	Wells Fargo	Loan	001-0460535-700	746.67	18,650.08	5,339.00
2014	FORD E350 SD XLT	1FMNE3BL3EDA61614	Wells Fargo	Loan	001-0460535-700	746.67	18,650.08	5,339.00
2014	FORD E350 SD XLT	1FMNE3BL6EDA61610	Wells Fargo	Loan	001-0460535-700	746.67	18,650.08	5,092.00
2014	FORD E350 SD XLT	1FMNE3BL1EDA61613	Wells Fargo	Loan	001-0460535-700	746.67	18,650.08	5,868.00
2014	FORD E350 SD XLT	1FMNE3BL7EDA61602	Wells Fargo	Loan	001-0460535-700	746.67	18,650.08	6,211.00

##Updated Fleet List by Category - 05.20.17

Loans

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**VEHICLES - LOANS**

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**VEHICLE FLEET LIST**

Year	Model	VIN	Finance Company	Lease or Loan	Lease or Loan Number	Monthly Rate	Amount Owed	FMV
2015	Ford Transit 350 HD Van Extended Length w/Dual Sliding Side Doors w/10360-lb GVWR Van 4D	1FBVU4XG6FKA38578	Wells Fargo	Loan	10342232-700	907.10	20,130.64	21,416.00
2013	Ford/Federal Coach Spirit Shuttle Bus	1FDXE4FS0DDA36152	Wells Fargo	Loan	001-0196265-702	1,847.50	34,056.24	Unknown
2014	GCA Freightliner	4UZACRDT1ECFL9509	Wells Fargo	Loan	001-0196265-701	3,309.00	51,783.32	Unknown
2014	MERCEDES Meridian Sprinter	WD3PF4CBXE5874085	Wells Fargo	Loan	001-0196265-702	1,847.50	34,056.24	Unknown
	<b>TOTALS</b>					<b>71,509.52</b>	<b>865,672.89</b>	<b>1,874,364.82</b>

##Updated Fleet List by Category - 05.20.17

Loans

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**VEHICLES - LOANS**

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**VEHICLE FLEET LIST**

Year	Model	VIN	Finance Company	Lease or Loan	Lease or Loan Number	Monthly Rate	Amount Owed	FMV
2014	Land Rover Range Rover Sport	SALWR2TF1EA377832	Chase Auto Finance	Lease	Unknown	1,578.87	Unknown	39,200.00
2014	Ford Transit Connect Passenger XLT Van 4D	1FBZX2ZM8FKA20552	Hincklease	Lease	4859-00978	630.93	Unknown	16,382.00
2016	Chevrolet Suburban 3500HD	1GNSKHKC7GR354216	Hincklease	Lease	4859-00996	890.35	Unknown	46,061.00
2016	Chevrolet Suburban 3500HD	1GNSKHKC3GR353967	Hincklease	Lease	4859-00997	890.35	Unknown	47,752.00
2016	Chevrolet Suburban 3500HD	1GNSKHKC4GR353539	Hincklease	Lease	4859-00998	890.35	Unknown	47,752.00
2016	Chevrolet Suburban 3500HD	1GNSKHKC3GR350678	Hincklease	Lease	4859-00994	890.35	Unknown	47,752.00
2016	Chevrolet Suburban 3500HD	1GNSKHKC8GR350658	Hincklease	Lease	4859-00993	890.35	Unknown	51,682.00
2016	Chevrolet Suburban 3500HD	1GNSKHKC9GR349762	Hincklease	Lease	4859-00995	890.35	Unknown	51,234.00
2015	Chevrolet Suburban LT	1GNSKJJC2FR689194	Hincklease	Lease	4859-01006	1,175.86	Unknown	30,547.00
2015	Ford E350 SD XLT 15 PS	1FBZX2ZM9FKA38994	Hincklease	Lease	4859-00979	630.93	Unknown	11,674.00
2013	Ford E350 SD XLT 15 PS	1FBSS3BL0DDA91043	Hincklease	Lease	4859-00692	597.17	Unknown	8,483.00
2013	Ford E350 SD XLT 15 PS	1FBSS3BL9DDA91042	Hincklease	Lease	4859-00696	597.17	Unknown	15,411.00
2013	Ford E350 SD XLT 15 PS	1FBSS3BL4DDA91045	Hincklease	Lease	4859-00693	597.17	Unknown	15,411.00
2015	FORD EXPEDITION	1FMJK1JT6FEF50842	Hincklease	Unknown	4859-01051		Unknown	30,888.00
2015	FORD EXPEDITION	1FMJK1JT9FEF26812	Hincklease	Lease	4859-01053	807.00	Unknown	29,459.00
2015	FORD T350XLT 12 PASS TRANSIT WAGON	1FBZX2ZM8FKA92156	Hincklease	Lease	4859-00990	630.93	Unknown	12,627.00
2015	FORD T350XLT 12 PASS TRANSIT WAGON	1FBZX2ZM4FKA75984	Hincklease	Lease	4859-00989	630.93	Unknown	12,171.00
2015	FORD T350XLT 12 PASS TRANSIT WAGON	1FBZX2ZM5FKA88128	Hincklease	Lease	4859-00991	630.93	Unknown	11,500.00
2016	FORD T350XLT 15 PASS - TRANSIT WAGON	1FBZX2YG3GKA26689	Hincklease	Lease	4859-00992	688.96	Unknown	21,725.00
2016	FORD T350XLT 15 PASS - TRANSIT WAGON	1FBZX2YGXGKA26690	Hincklease	Lease	4859-00999	688.96	Unknown	15,608.00
2016	FORD T350XLT 15 PASS - TRANSIT WAGON	1FBZX2YG1GKA26691	Hincklease	Lease	4859-01000	688.96	Unknown	17,079.00
2015	FORD TRANSIT 350 WAGON	1FBZX2ZM1FKA39041	Hincklease	Lease	4859-00981	630.93	Unknown	13,338.00
2016	Ford Transit 350 Wagon XLT Extended Length w/High Roof w/Sliding Side Door Van 3D	1FBVU4XG7GKB22474	Hincklease	Lease	4859-01008	751.23	Unknown	27,743.00
2016	Ford Transit 350 Wagon XLT Extended Length w/High Roof w/Sliding Side Door Van 3D	1FBVU4XG9GKB22475	Hincklease	Lease	4859-01007	751.23	Unknown	27,889.00
2016	XLT Extended Length w/High Roof w/Sliding Side Door Van 3D	1FBVU4XG1GKB33048	Hincklease	Lease	4859-01009	756.51	Unknown	28,174.00
2015	FORD TRANSIT WAGON	1FBZX2ZM6FKA20470	Hincklease	Lease	4859-00982	630.93	Unknown	13,637.00
2015	FORD TRANSIT WAGON	1FBZX2ZM9FKA63183	Hincklease	Lease	4859-00977	630.93	Unknown	13,924.00
2015	FORD TRANSIT WAGON	1FBZX2ZM7FKA17514	Hincklease	Lease	4859-00976	630.93	Unknown	13,172.00

##Updated Fleet List by Category - 05.20.17

Leases

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**VEHICLE FLEET LIST**

Year	Model	VIN	Finance Company	Lease or Loan	Lease or Loan Number	Monthly Rate	Amount Owed	FMV
2015	FORD TRANSIT WAGON	1FBZX2ZM7FKA63196	Hincklease	Lease	4859-00980	630.93	Unknown	12,707.00
2016	LINCOLN MKT	2LMHJ5NKXGBL00936	Hincklease	Lease	4859-00986	1,181.00	Unknown	20,595.00
2016	LINCOLN MKT	2LMHJ5NK1GBL00937	Hincklease	Lease	4859-00985	1,181.00	Unknown	20,595.00
2016	Mercedes-Benz Sprinter 2500 Passenger High Roof w/170" WB Van 3D	WDZFE7CD5GP203096	Hincklease	Lease	4859-00950	1,217.10	Unknown	32,942.00
2012	RAM	1C6RD7GT56S188504	Hincklease	Lease	4859-01011	466.75	Unknown	15,769.00
74	Ram Truck	FS625210	Hincklease	Lease	4859-00984	639.00	Unknown	Unknown
73	Ram Truck	FS515112	Hincklease	Lease	4859-00983	639.00	Unknown	Unknown
72	Ram Truck	ES478674	Hincklease	Lease	4859-00975	595.42	Unknown	Unknown
71	Ram Truck	ES478661	Hincklease	Lease	4859-00974	595.42	Unknown	Unknown
14V92	Van	1FBSS3BL5DDA91037	Hincklease	Lease	121-4	597.17	Unknown	4,649.00
14V91	Van	1FBSS3BLXDDA91048	Hincklease	Lease	121-3	597.17	Unknown	4,649.00
14V90	Van	1FBSS3BL6DDA91046	Hincklease	Lease	121-2	597.17	Unknown	4,649.00
14V45	Van	1FBSS3BL8DDA91050	Hincklease	Lease	4859-00694	597.17	Unknown	4,649.00
14V43	Van	1FBSS3BL7DDA91041	Hincklease	Lease	4859-00695	597.17	Unknown	4,649.00
2017	TURTLE TOP	1FDWE3FSXGDC19181	TCF	Lease	Master Lease Number: 0504558M Equipment Sched No. :003-0504558-100	1,352.87	97,406.64	Unknown
2017	TURTLE TOP	1FDWE3FS8GDC36206	TCF	Lease	Master Lease Number: 0504558M Equipment Sched No. :003-0504558-100	1,352.87	97,406.64	Unknown
2016	Cadillac Escalade ESV	1GYS4HKJ6GR363338	Wells Fargo	Lease	Unknown	1,596.67	Unknown	45,216.00
2016	Cadillac Escalade ESV	1GYS4HKJ5GR363363	Wells Fargo	Lease	Unknown	1,596.67	Unknown	45,750.00
2016	Cadillac Escalade ESV	1GYS4HKJ8GR363373	Wells Fargo	Lease	Unknown	1,596.67	Unknown	45,750.00
2016	Cadillac Escalade ESV	1GYS4HKJ5GR364769	Wells Fargo	Lease	Unknown	1,596.67	Unknown	46,149.00
2016	Cadillac Escalade ESV	1GYS4HKJ6GR364912	Wells Fargo	Lease	Unknown	1,596.67	Unknown	45,617.00
2016	Cadillac Escalade ESV	1GYS4HKJ1GR364753	Wells Fargo	Lease	Unknown	1,596.67	Unknown	49,011.00
	<b>TOTALS</b>					<b>43,116.79</b>	<b>194,813.28</b>	<b>1,121,621.00</b>

##Updated Fleet List by Category - 05.20.17

Leases

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**VEHICLE FLEET LIST**

Year	Model	VIN	Finance Company	Lease or Loan	Lease or Loan Number	Monthly Rate	Amount Owed	FMV
2013	J4500	2MG3J MBA1DW066535	Bank of America	Loan	2581900-702	6,812.92	Unknown	341,300.00
2013	TX45	YE2TC1AB7D2044409	Bank of America	Loan	2581900-701	7,034.51	Unknown	343,000.00
2008	J4500	2M93JMHA38W064578	BMO Harris	Loan	5,903,804,001.00	5,057.40	10,087.55	208,300.00
2016	International Ameritrans M2	1FVACWDT1GHHN8113	First Midwest Equipment Finance Company	Lease	Agreement No.: 67894-001	3,026.80	185,451.00	Unknown
2016	International Odyssey	1FVACWDT2GHHA5691	First Source Bank	Lease	Application No.: 4124291	3,369.45	207,276.00	Unknown
2017	J4500	2MG3J MBA1HW067920	Key Equipment Finance	Loan	1800112346	6,054.42	487,350.00	Unknown
2017	J4500	2MG3J MBA7HW067923	Key Equipment Finance	Loan	1800112346	6,054.42	487,350.00	Unknown
2015	J4500	2MG3J MBA0FW067243	Peoples Capitol	Loan	2356-002	5,559.25	429,924.00	385,200.00
2015	J4500	2MG3J MBA8FW067250	Peoples Capitol	Loan	2356-003	5,559.25	429,925.00	385,200.00
2015	J4500	2MG3J MBA4FW067293	Peoples Capitol	Loan	2356-004	5,584.00	448,186.00	385,200.00
2009	J4500	2MG3J MBA09W065357	Peoples Capitol	Lease	2366-001	4,762.77	60,630.00	235,600.00
2011	T2145	YE2TC19B0B2044754	Peoples Capitol	Lease	2366-002	5,760.00	69,120.00	307,200.00
2011	T2145	YE2TC19B6B2044757	Peoples Capitol	Lease	2366-003	5,760.00	74,880.00	307,200.00
2015	BCA45	4B9000JCXFZ489004	Signature Financial	Loan	109753-002	5,079.38	323,960.51	Unknown
2014	TX45	YE2YC11BXE2041110	Sun Trust	Loan	443-7009108-002	7,052.68	310,317.70	439,000.00
2014	TX45	YE2YC11B3E2041112	Sun Trust	Loan	443-7009108-002	7,052.68	310,317.70	439,000.00
2016	Dodge RAM Ameritrans	3C7WRMDL8DG598919	TCF	Lease	Master Lease Number: 0504558M Equipment Sched No.: 003-0504558-100	2,063.80	129,114.00	121,940.15
2015	Dodge RAM Ameritrans	3C7WRMDL7DG598913	TCF	Lease	Master Lease Number: 0504558M Equipment Sched No.: 003-0504558-100	2,077.95	99,133.00	90,093.20
2015	BCA45	4B9000JCLPZ4B9005	Webster Capital	Unknown	Unknown	5,421.70	Unknown	Unknown
2011	J4500	2MG3J MBA1BW065910	Wells Fargo	Lease	001-0196265-106	5,700.00	120,797.00	299,300.00
2011	J4500	2MG3J MBA0BW065901	Wells Fargo	Loan	001-0196265-703	5,136.00	253,750.34	299,300.00
2011	J4500	2MG3J MBA6BW065899	Wells Fargo	Loan	001-0196265-703	5,136.00	253,750.34	299,300.00
2011	J4500	2MG3J MBA2BW065950	Wells Fargo	Loan	001-0196265-704	5,136.00	257,878.91	299,300.00
2011	J4500	2MG3J MBA4BW065951	Wells Fargo	Loan	001-0196265-704	5,136.00	257,878.91	299,300.00
2011	J4500	2MG3J MBA9BW065900	Wells Fargo	Loan	001-0196265-705	5,136.00	261,991.41	299,300.00
2010	J4500	2MG3JMEA8AW065552	Wells Fargo	Lease	001-0196265-103	5,045.00	55,470.50	259,800.00
2010	J4500	2MG3JMEA8AW065553	Wells Fargo	Lease	001-0196265-104	5,047.00	55,474.50	259,800.00
2008	J4500	2M93JMHA78W064468	Wells Fargo	Loan	001-0196265-700	5,045.00	5,019.20	208,300.00
<b>TOTALS</b>						<b>145,660.38</b>	<b>5,585,033.57</b>	<b>6,511,933.35</b>

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Bus financings

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**VEHICLES - HYBRID LEASING  
(BUS FINANCINGS)**

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**VEHICLE FLEET LIST**

Year	Model	VIN	Finance Company	Lease or Loan	Lease or Loan Number	Monthly Rate	Amount Owed	FMV
2013	Cadillac SRX	3GYFNJE30DS568231	Ally	Loan	024-9201-58736	Unknown	7,910.36	Unknown
2016	Dodge Durango SXT Sport Utility 4D	1C4RDJDG8GC442171	Hincklease	Unknown	4859-01054	Unknown	Unknown	14,442.00
2015	Dodge Durango SXT Sport Utility 4D	1C4RDJDG1FC245275	Hincklease	Unknown	4859-01012	Unknown	Unknown	14,442.00
	Ford Transit Connect Passenger XLT Van 4D	1FBZX2YG3GKA26692	Hincklease	Unknown	4859-01056	Unknown	Unknown	16,382.00
2015	Cadillac Escalade	1GYS4SKJ6FR527599	Hincklease	Unknown	3740-1	Unknown	Unknown	39,797.00
2015	Cadillac Escalade	1GYS4SKJ2FR528622	Hincklease	Unknown	3740-3	Unknown	Unknown	38,843.00
2016	CADILLAC XTS	2G61U5S33G9138549	Hincklease	Unknown	3740-00971	Unknown	Unknown	20,913.00
2016	CADILLAC XTS	2G61U5S34G9139399	Hincklease	Unknown	3740-00972	Unknown	Unknown	21,854.00
2015	CHEVROLET EXPRESS VAN	1GAZG1FG2F1128359	Hincklease	Unknown	4859-00741	Unknown	Unknown	11,853.00
2015	CHEVROLET EXPRESS VAN	1GAZG1FGXF1126410	Hincklease	Unknown	4859-00723	Unknown	Unknown	12,859.00
2015	CHEVROLET EXPRESS VAN	1GAZG1FG9F1137673	Hincklease	Unknown	4859-00782	Unknown	Unknown	10,566.00
2015	CHEVROLET EXPRESS VAN	1GAZGAFG0F1137674	Hincklease	Unknown	4859-00805	Unknown	Unknown	9,861.00
2016	Chevrolet Suburban 3500HD	1GNSKHKC2GR195749	Hincklease	Unknown	4859-00973	Unknown	Unknown	53,306.00
2015	Chevrolet Suburban LT	1GNSKJKC6FR690042	Hincklease	Unknown	4859-01001	Unknown	Unknown	32,908.00
2015	Chevrolet Suburban LT	1GNSKJKC4FR692033	Hincklease	Unknown	4859-01005	Unknown	Unknown	30,347.00
2015	Chevrolet Suburban LT	1GNSKJKC4FR666872	Hincklease	Unknown	4859-01003	Unknown	Unknown	31,637.00
2015	Chevrolet Suburban LT	1GNSKJKC9FR512383	Hincklease	Unknown	4859-00753	Unknown	Unknown	24,792.00
2015	Chevrolet Suburban LT	1GNSKJKC8FR685229	Hincklease	Unknown	4859-01004	Unknown	Unknown	28,364.00
2015	Chevrolet Suburban LT	1GNSKJKC3FR670007	Hincklease	Unknown	4859-01002	Unknown	Unknown	29,549.00
2015	Chevrolet Suburban LT	ZGNSKJKCXFR513171	Hincklease	Unknown	4859-01052	Unknown	Unknown	29,947.00
2013	FORD E350 SD XLT	1FBNE3BL2DDA35240	Hincklease	Unknown	4859-00831	Unknown	Unknown	10,350.00
2013	FORD E350 SD XLT	1FBNE3BLXDDA35244	Hincklease	Unknown	4859-00832	Unknown	Unknown	10,752.00
2012	FORD E350 SD XLT	1FBNE3BL6CDA45722	Hincklease	Unknown	4859-00833	Unknown	Unknown	9,733.00
2015	FORD EXPEDITION	1FMJK1JT6FEF43681	Hincklease	Unknown	4859-01050	Unknown	Unknown	32,076.00
2015	FORD EXPEDITION	1FMJK1JT6FEF43714	Hincklease	Unknown	4859-01049	Unknown	Unknown	31,993.00
2015	FORD EXPEDITION	1FMJK1JT6FEF50842	Hincklease	Unknown	4859-01051	Unknown	Unknown	30,888.00

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Unknown

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**VEHICLES - LEASES or LOANS  
(to be determined)**

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**VEHICLE FLEET LIST**

2016	Ford Transit 350 HD Van Extended Length SRW High Roof w/Sliding Side Door Van 3D	1FBZX2XG8FKA38580	Hincklease	Unknown	4859-01055	Unknown	Unknown	23,491.00
2017	Ford Transit 350 Van Extended Length High Roof w/Sliding Side Door w/LWB Van 3D	1FBVU4XG0HKA25747	Hincklease	Unknown	4859-01014	Unknown	Unknown	24,343.00
2015	FORD TRANSIT 350 WAGON	1FBZX2ZM9FKA38798	Hincklease	Unknown	4859-00988	Unknown	Unknown	13,338.00
2016	Ford Transit 350 Wagon XLT Extended Length w/High Roof w/Sliding Side Door Van 3D	1FBVU4XGXGKB33047	Hincklease	Unknown	4859-01010	Unknown	Unknown	28,104.00
2012	Unknown	C1121090	Hincklease	Unknown	4859-00451	Unknown	Unknown	Unknown
2016	FORD TRANSIT WAGON	1FBZX2YG6GKA22085	Unknown	Unknown	Unknown	Unknown	Unknown	20,541.00
2003	J4500	2M93JMPA23W062282	Unknown	Unknown	Unknown	Unknown	Unknown	100,100.00
	<b>TOTALS</b>					<b>Unknown</b>	<b>7,910.36</b>	<b>808,371.00</b>

##Updated Fleet List by Category - 05.20.17

Unknown

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**VEHICLES - LEASES or LOANS  
(to be determined)**

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## VEHICLE LEASES

Lessor	Lessee	Date	Vehicle	Term/Termination Date
Hinckley's, Inc., dba Hincklease Attn: Brian Baker 2305 S President's Dr Ste F West Valley City, UT 84120	<i>See attached "VEHICLE FLEET LIST (VEHICLES - TRUE LEASES)" pages 7 &amp; 8, and "VEHICLE FLEET LIST (VEHICLES - LEASES or LOANS)" pages 10 &amp; 11</i>			
Land Rover c/o Chase Auto Finance PO Box 78074 Phoenix, AZ 85062-8074	All Resort Express, Inc., and Gordon W. Cummins	7/14/2014	2014 Land Rover Model Range Rover VIN S4LWR2TF1EA377832 [also shown on "VEHICLE FLEET LIST (VEHICLES - TRUE LEASES)" p7]	6/14/2017
TCF 11100 Wayzata Blvd Ste 801 Minnetonka, MN 55305	2017 Turtle Top, VIN 1FDWE3FSXGDC19181, 2017 Turtle Top, VIN 1FDWE3FS8GDC36206 [also shown on "VEHICLE FLEET LIST (VEHICLES - TRUE LEASES)" p7]			

**VEHICLE LEASES**

Lessor	Lessee	Date	Vehicle	Term/Termination Date
Wells Fargo Equipment Financing			(6) 2016 Cadillac Escalades, VINs1GYS4HKJ6GR363338 1GYS4HKJ5GR363363 1GYS4HKJ8GR363373 1GYS4HKJ5GR364769 1GYS4HKJ6GR364912 1GYS4HKJ1GR364753 <i>See "VEHICLE FLEET LIST (VEHICLES - TRUE LEASES)" page 8</i>	

**SCHEDULE OF BUILDING LEASES**

Lessor	Lessee	Date	Location	Term/Termination Date	Rent	Notes
Associated Investments, LLC 560 S 300 E Salt Lake City, UT 84111	Resort Express, Inc.	06/01/11	534 S 500 W, SLC, UT (warehouse)	5/31/2016	\$4,335 to 5/31/16	Currently at will No option to renew
Barron Wilson, LLC 5304 Mountain Meadows Dr Park City, UT 84098	All Resort Coach, Inc.	04/12/06	549 W 500 S, SLC, UT 84101 (Lewis offices)	4/30/15 + two 3-yr terms	\$19,500.00	
CV PropCo, LLC c/o Gatski Commercial Real Estate Services 4755 Dean Martin Dr Las Vegas, NV 89103	All Resort Group, Inc.	12/01/16	4740 S Valley View Blvd (Arena Conference Center), Las Vegas, NV	12/31/2022	\$11,884.20	\$12,240.73 beg 2/28/18
Euro Treasures Properties II, LLC 470 W 600 S Salt Lake City, UT 84060	Resort Express	12/14/11	Lot behind 470 W 600 S, SLC, 84101	1 year; 4 extensions	\$1,200 +3% annually	Currently at will
Donna & Karl Larsen 8153 S Adams St Midvale, UT 84047	All Resort Coach, Inc.	09/23/13	5428 W Leo Park Rd, West Jordan, UT 84088	11/30/2017 + (2) 5-year terms	\$4,800/mo; \$5,040/mo to 11/30/2022; \$5,292/mo to 11/30/2027	
Park City Investors Ltd. 6440 S Wasatch Blvd #100 Salt Lake City, UT 84121	All Resort Group, Inc.	10/01/16	Park Meadows Plaza 1500 Kearns Blvd. Suites F-100, 200, 300	5 years	\$11,622.76/mo until 9/30/17; \$11,843.86/mo until 9/30/18; \$12,070.78/mo to 9/30/19; \$11,729.76/mo to 9/30/20; \$11,962.49 to 9/30/21	

**SCHEDULE OF BUILDING LEASES**

Lessor	Lessee	Date	Location	Term/Termination Date	Rent	Notes
The Hunt Family Trust dtd. 12/18/1987	James Lawrence "Larry" Killingsworth & Carolyn Killingsworth	06/06/16	5663 Oslo Lane, Park City, UT 84098 (Larry's house)	6/30/2018	\$3,500/mo	
Salt Lake City Corporation c/o Airport Contracts & Proc. Mgr. SLC International Airport PO Box 145550 Salt Lake City, UT 84114-5550	Premier Transportation	05/01/16	(2) Airport booths	4/30/2019	\$2,725.00/mo	\$8,175.00 deposit
Salt Lake City Corporation c/o Airport Contracts & Proc. Mgr. SLC International Airport PO Box 145550 Salt Lake City, UT 84114-5550	PC Transportation	05/01/16	(2) Airport booths	4/30/2019	\$3,058.33/mo	\$9,175.00 deposit
Salt Lake City Corporation c/o Airport Contracts & Proc. Mgr. SLC International Airport PO Box 145550 Salt Lake City, UT 84114-5550	Resort Express	05/01/16	(2) Airport booths	4/30/2019	\$3,608.33/mo	\$10,825.00 deposit

**INSURANCE CONTRACTS**

Provider	Coverage	Monthly or Annual Premium
Auto Owners	Renters' Insurance for Lewis Building	\$799.82/yr
Philadelphia Indemnity Insurance Company (REI and Xpress4Less)	Business Auto Liability Uninsured Motorists Underinsured Motorists Personal Injury Protection Comprehensive Collision Hired & Non-owned Auto General Liability Business Personal Property Business Income Stock Inventory	\$61,595.00/mo
Citadel Insurance Services, LC (for benefit of Rio Tinto Kennecott Utah Copper LLC)	Commercial General Liability Automobile Liability	\$9,220.00
Hartford Insurance Company of the Midwest	Property Flood Insurance for leased business premises at 549 W 500 S, Salt Lake City, UT	\$1,536.00
National Interstate Insurance (Philadelphia Indemnity)	Non-TRAX leases	\$15,971.25/mo
Capital Premium (Hiscox Insurance Co., Inc. Risk Placement Services (Scottsdale))	Executive coverage	\$1,600.00/yr
WCF Insurance Workers Compensation Fund (Advantage Workers Compensation Insurance Co.) (Moreton & Company)	Workers' compensation fund	\$601,887.61/yr

#Executory Contracts List (non-customers) 05.21.17

Insurance

5 of 7

**SCHEDULE G**  
**INSURANCE CONTRACTS**

5/21/2017 @ 10:40 PM

**INSURANCE CONTRACTS**

<b>Benefit</b>	<b>Provider</b>
Health Insurance	Health EZ (through Standard Life and Accident Insurance Company Treaty #SLA15680-E and EBU case #049301)
Dental Insurance	Humana
Vision Insurance	Humana
Life Insurance	Humana (company sponsored basic) Assurant/Sun Life (company sponsored AD&D)
Pharmacy Benefits	Magellan Rx Management, LLC
Long Term/Short Term Disability	Transamerica (driver) Assurant (admin)
Supplemental Life Insurance	Assurant/Sun life (vol. life)

## **EMPLOYMENT CONSULTING AGREEMENTS**

<b>Entity</b>	<b>Employee or other party to contract</b>	<b>Date</b>	<b>Title</b>	<b>Term/Termination</b>	
				<b>Date</b>	<b>Comments</b>
All Resort Group, Inc.	Richard & Wendy Bizzaro; Laurie & Gordon Cummins	Jun-15	Retirement Agreement	3 years	Only provides provisions for Laurie & Gordon Cummins
All Resort Group, Inc.	Ana Busin	4/24/2017	Employment Agreement	4/23/2020	Year 1: \$90,000 Year 2: \$105,000 Year 3: \$120,000
All Resort Group, Inc.	Jerry Fox	2/3/2017	Consulting Agreement (marketing)	2/3/2018	\$2,000/month for marketing services
All Resort Group, Inc.	Larry Killingsworth	4/24/2017	Employment Agreement	4/23/2020	Year 1: \$185,000 Year 2: \$215,000 Year 3: \$245,000
All Resort Group, Inc.	Kaitlyn Quinley	4/24/2017	Employment Agreement	4/23/2020	Year 1: \$130,000 Year 2: \$145,000 Year 3: \$160,000

Fill in this information to identify the case:

Debtor name All Resort Group, Inc.

United States Bankruptcy Court for the: DISTRICT OF UTAH

Case number (if known) 17-23687

Check if this is an amended filing

## Official Form 206D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		<i>Column A</i>	<i>Column B</i>
		<b>Amount of claim</b>	<b>Value of collateral that supports this claim</b>
2.1 <b>Access Business Finance</b>	<p>Creditor's Name <b>14205 SE 36th St Ste 350 Bellevue, WA 98006</b></p> <p>Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred <b>11/7/16</b></p> <p>Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien <b>All assets other than rolling stock (titled vehicles)</b></p> <p>Describe the lien <b>UCC-1</b></p> <p>Is the creditor an insider or related party?  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is:  Check all that apply  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>	<b>\$747,765.17</b> <b>\$839,830.64</b>
2.2 <b>Ally</b>	<p>Creditor's Name <b>PO Box 380901 Minneapolis, MN 55438</b></p> <p>Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred <b>4/11/14</b></p> <p>Last 4 digits of account number <b>4387</b></p> <p>Do multiple creditors have an interest in the same property?  <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien <b>2014 Chevrolet Traverse, VIN 1GNKVHKD9E3282897</b></p> <p>Describe the lien <b>Note &amp; Security Agreement w/ Title</b></p> <p>Is the creditor an insider or related party?  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is:  Check all that apply</p>	<b>\$17,144.69</b> <b>\$12,534.00</b>

Debtor All Resort Group, Inc.

Case number (if known)

17-23687

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Contingent  
 Unliquidated  
 Disputed

**2.3** Ally Unknown Unknown  
 Creditor's Name

**PO Box 380901**  
**Minneapolis, MN 55438**

Creditor's mailing address

Creditor's email address, if known

**Date debt was incurred**  
**1/29/13**  
**Last 4 digits of account number**  
**0945**

**Do multiple creditors have an interest in the same property?**

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien  
**2013 Cadillac SRX, VIN 3GYFNJE30DS568231**

**Unknown**

**Unknown**

**Describe the lien**  
**Note & Security Agreement w/ Title? or Lease**

**Is the creditor an insider or related party?**

No

Yes

**Is anyone else liable on this claim?**

No

Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

**As of the petition filing date, the claim is:**

**Check all that apply**

Contingent  
 Unliquidated  
 Disputed

**2.4** Ally **\$11,830.43** **\$13,187.00**  
 Creditor's Name

**PO Box 380901**  
**Minneapolis, MN 55438**

Creditor's mailing address

Creditor's email address, if known

**Date debt was incurred**  
**6/19/13**  
**Last 4 digits of account number**  
**6865**

**Do multiple creditors have an interest in the same property?**

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien  
**2014 Kia Sorento, VIN 5XYKUDA74EG44822**

**\$11,830.43**

**\$13,187.00**

**Describe the lien**

**Note & Security Agreement w/ Title**

**Is the creditor an insider or related party?**

No

Yes

**Is anyone else liable on this claim?**

No

Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

**As of the petition filing date, the claim is:**

**Check all that apply**

Contingent  
 Unliquidated  
 Disputed

**2.5** Ally **\$6,462.06** **\$8,378.00**  
 Creditor's Name

**PO Box 380901**  
**Minneapolis, MN 55438**

Creditor's mailing address

Creditor's email address, if known

Describe debtor's property that is subject to a lien  
**2013 SUBURBAN, VIN 1GNSKJE7XDR213013**

**\$6,462.06**

**\$8,378.00**

**Describe the lien**

**Note & Security Agreement w/ Title**

**Is the creditor an insider or related party?**

No

Yes

Debtor All Resort Group, Inc.  
Name

Case number (if known)

17-23687

Date debt was incurred

Last 4 digits of account number

0732

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.6 **Ally**

Creditor's Name

**PO Box 380901  
Minneapolis, MN 55438**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

6375

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

\$6,460.60

\$8,378.00

**2013 SUBURBAN, VIN 1GNSKJE70DR212906**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.7 **Ally**

Creditor's Name

**PO Box 380901  
Minneapolis, MN 55438**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

4297

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

\$6,460.60

\$7,945.00

**2013 SUBURBAN, VIN 1GNSKJE74DR212892**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.8 **Ally**

Describe debtor's property that is subject to a lien

\$6,711.89

\$8,883.00

Debtor All Resort Group, Inc.

Case number (if known)

17-23687

Creditor's Name

**PO Box 380901  
Minneapolis, MN 55438**

Creditor's mailing address

**2013 SUBURBAN, VIN 1GNSKJE76DR212876**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number

**8286**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

Contingent

Unliquidated

Disputed

**2.9**

**Ally**

Creditor's Name

**PO Box 380901  
Minneapolis, MN 55438**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2013 SUBURBAN, VIN 1GNSKJE79DR212760**

**\$6,460.60**

**\$8,883.00**

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**9592**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent

Unliquidated

Disputed

**2.1**

**Ally**

Creditor's Name

**PO Box 380901  
Minneapolis, MN 55438**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2013 SUBURBAN, VIN 1GNSKJE75DR212707**

**\$6,460.71**

**\$9,162.00**

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**4280**

Do multiple creditors have an interest in the same property?

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Debtor All Resort Group, Inc.

Case number (if known)

17-23687

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Contingent  
 Unliquidated  
 Disputed

<p><b>2.1</b> <b>1</b> <b>Ally</b> Creditor's Name</p> <p><b>PO Box 380901</b> <b>Minneapolis, MN 55438</b> Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p><b>Date debt was incurred</b></p> <p><b>Last 4 digits of account number</b> <b>5931</b></p> <p><b>Do multiple creditors have an interest in the same property?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.         </p>	<p><b>Describe debtor's property that is subject to a lien</b> <b>2015 FORD TRANSIT (Hightop ), VIN 1FBVU4XG2FKA14018</b></p> <p><b>Describe the lien</b> <b>Note &amp; Security Agreement w/ Title</b></p> <p><b>Is the creditor an insider or related party?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes         </p> <p><b>Is anyone else liable on this claim?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)         </p> <p><b>As of the petition filing date, the claim is:</b>            Check all that apply  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed         </p>	<b>\$21,345.00</b> <b>\$14,901.00</b>
<p><b>2.1</b> <b>2</b> <b>Ally</b> Creditor's Name</p> <p><b>PO Box 380901</b> <b>Minneapolis, MN 55438</b> Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p><b>Date debt was incurred</b></p> <p><b>Last 4 digits of account number</b> <b>6062</b></p> <p><b>Do multiple creditors have an interest in the same property?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.         </p>	<p><b>Describe debtor's property that is subject to a lien</b> <b>2011 Suburban, VIN 1GNSKJE31BR300809</b></p> <p><b>Describe the lien</b> <b>Note &amp; Security Agreement w/ Title</b></p> <p><b>Is the creditor an insider or related party?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes         </p> <p><b>Is anyone else liable on this claim?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)         </p> <p><b>As of the petition filing date, the claim is:</b>            Check all that apply  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed         </p>	<b>\$4,483.06</b> <b>\$19,501.00</b>
<p><b>2.1</b> <b>3</b> <b>Ally</b> Creditor's Name</p> <p><b>PO Box 380901</b> <b>Minneapolis, MN 55438</b> Creditor's mailing address</p>	<p><b>Describe debtor's property that is subject to a lien</b> <b>2012 SORENTO, VIN 5XYKUD29DG332751</b></p> <p><b>Describe the lien</b> <b>Note &amp; Security Agreement w/ Title</b></p>	<b>\$1,715.91</b> <b>\$5,198.00</b>

Debtor All Resort Group, Inc. Case number (if known) 17-23687

Name

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**1549**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.1  
4

**Bank of America**

Creditor's Name

**PO Box 405874**  
**Atlanta, GA 30384-5874**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**5/31/13**

Last 4 digits of account number

**0702**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2013 MCI Model J4500, VIN**  
**2MG3JMBA1DW066535 [Bus No. 511]**

**Unknown**

**\$341,300.00**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.1  
5

**Bank of America**

Creditor's Name

**PO Box 405874**  
**Atlanta, GA 30384-5874**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**0701**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2013 Van Hool Coach TX45, VIN**  
**YE2TC1AB7D2044409 [Bus No. 512]**

**\$225,000.00**

**\$343,000.00**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

Debtor All Resort Group, Inc.  
Name

Case number (if known)

17-23687

<p><b>2.1 6</b></p> <p><b>Bank of the West</b> Creditor's Name</p> <p><b>PO Box 7167 Pasadena, CA 91109-7167</b> Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p><b>Date debt was incurred</b></p> <p><b>Last 4 digits of account number</b></p> <p><b>Do multiple creditors have an interest in the same property?</b></p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien <b>Unknown</b></p> <p>Describe the lien</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p><b>Unknown</b></p> <p><b>Unknown</b></p>
<p><b>2.1 7</b></p> <p><b>BMO Harris Bank NA</b> Creditor's Name</p> <p><b>PO Box 71951 Chicago, IL 60694-1951</b> Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p><b>Date debt was incurred</b> <b>5/17/11</b></p> <p><b>Last 4 digits of account number</b> <b>4001</b></p> <p><b>Do multiple creditors have an interest in the same property?</b></p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>		<p><b>\$10,087.55</b></p> <p><b>\$208,300.00</b></p>
<p>Describe debtor's property that is subject to a lien <b>2008 MCI Coach Model J4500, VIN#2M93JMHA38W064578</b></p> <p>Describe the lien</p> <p><b>Note &amp; Security Agreement w/ Title</b></p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>		
<p><b>2.1 8</b></p> <p><b>Daimler-Mercedes Benz Financial Svcs.</b> Creditor's Name</p> <p><b>Carol Stream, IL 60197-5261</b> Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p><b>Date debt was incurred</b></p>		<p><b>\$58,439.46</b></p> <p><b>Unknown</b></p>
<p>Describe debtor's property that is subject to a lien <b>2014 Thomas Built Bus HDX, VIN 1T7YU2F28E1167528</b></p> <p>Describe the lien</p> <p><b>Note &amp; Security Agreement w/ Title</b></p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No</p>		

Debtor All Resort Group, Inc.  
Name

Case number (if known)

17-23687

Last 4 digits of account number  
**2001**

Do multiple creditors have an interest in the same property?  
 No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:  
Check all that apply

- Contingent
- Unliquidated
- Disputed

**2.1**  
**9** **Daimler-Mercedes Benz Financial Svcs.**

Creditor's Name

Describe debtor's property that is subject to a lien  
**2014 Thomas Built Bus HDX, VIN 1T7YU2F26E1167530**

**\$58,439.46**

**Unknown**

**Carol Stream, IL 60197-5261**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number  
**2001**

Do multiple creditors have an interest in the same property?  
 No  
 Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:  
Check all that apply

- Contingent
- Unliquidated
- Disputed

**2.2**  
**0** **Daimler-Mercedes Benz Financial Svcs.**

Creditor's Name

Describe debtor's property that is subject to a lien  
**2014 Thomas Built Bus HDX, VIN 1T7YU2F28E1167531**

**\$58,439.46**

**Unknown**

**Carol Stream, IL 60197-5261**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number  
**2001**

Do multiple creditors have an interest in the same property?  
 No  
 Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:  
Check all that apply

- Contingent
- Unliquidated
- Disputed

**2.2**  
**1** **Daimler-Mercedes Benz Financial Svcs.**

Describe debtor's property that is subject to a lien

**\$58,439.46**

**Unknown**

Debtor All Resort Group, Inc.

Case number (if known)

17-23687

Creditor's Name

**Carol Stream, IL  
60197-5261**

Creditor's mailing address

**2014 Thomas Built Bus HDX, VIN  
1T7YU2F2F2XE167529**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**2001**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

Contingent

Unliquidated

Disputed

2.2	<b>Daimler-Mercedes Benz Financial Svcs.</b>	<b>\$58,439.46</b>	<b>Unknown</b>
-----	----------------------------------------------	--------------------	----------------

Creditor's Name

**Carol Stream, IL  
60197-5261**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2014 Thomas Built Bus HDX, VIN  
1T7YU2F2FXE1167529**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**2001**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

Contingent

Unliquidated

Disputed

2.2	<b>Daimler-Mercedes Benz Financial Svcs.</b>	<b>\$17,834.67</b>	<b>Unknown</b>
-----	----------------------------------------------	--------------------	----------------

Creditor's Name

**Carol Stream, IL  
60197-5261**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2008 Thomas Built Bus HDX, VIN  
1T7YU2F2381290075**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Debtor All Resort Group, Inc.  
Name

Case number (if known)

17-23687

**5001**

Do multiple creditors have an interest in the same property?

- No
- Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.2 **4 Daimler-Mercedes Benz Financial Svcs.**

Creditor's Name

Describe debtor's property that is subject to a lien

**\$17,834.67**

**Unknown**

**Carol Stream, IL  
60197-5261**

Creditor's mailing address

2008 Thomas Built Bus HDX, VIN

1T7YU2F2581290076

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

- No
- Yes

Is anyone else liable on this claim?

- No
- Yes. Fill out Schedule H: Codebtors (Official Form 206H)

Last 4 digits of account number

**5001**

Do multiple creditors have an interest in the same property?

- No
- Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.2 **5 Daimler-Mercedes Benz Financial Svcs.**

Creditor's Name

Describe debtor's property that is subject to a lien

**\$17,834.67**

**Unknown**

**Carol Stream, IL  
60197-5261**

Creditor's mailing address

2008 Thomas Built Bus HDX, VIN

1T7YU2F2781290077

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

- No
- Yes

Is anyone else liable on this claim?

- No
- Yes. Fill out Schedule H: Codebtors (Official Form 206H)

Last 4 digits of account number

**5001**

Do multiple creditors have an interest in the same property?

- No
- Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.2 **6 Daimler-Mercedes Benz Financial Svcs.**

Describe debtor's property that is subject to a lien

**\$17,834.67**

**Unknown**

Debtor All Resort Group, Inc.

Case number (if known)

17-23687

Creditor's Name

**Carol Stream, IL  
60197-5261**

Creditor's mailing address

**2008 Thomas Built Bus HDX, VIN  
1T7YU2F29381290078**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**5001**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

Contingent

Unliquidated

Disputed

2.2 7	<b>Daimler-Mercedes Benz Financial Svcs.</b>	<b>\$17,834.67</b>	<b>Unknown</b>
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Creditor's Name

**Carol Stream, IL  
60197-5261**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2008 Thomas Built Bus HDX, VIN  
1T7YU2F2081290079**

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**5001**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

Contingent

Unliquidated

Disputed

2.2 8	<b>First Midwest Equipment Finance Company</b>	<b>\$185,451.00</b>	<b>Unknown</b>
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Creditor's Name

**80 N Gordon  
Elk Grove Village, IL 60007**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2016 Freightliner Ameritran M2, VIN  
1FVACWDT1GHHN8113**

Creditor's email address, if known

Date debt was incurred

**3/1/17**

Last 4 digits of account number

**4001**

As of the petition filing date, the claim is:

Check all that apply

Contingent

Unliquidated

Disputed

Debtor All Resort Group, Inc.  
Name

Case number (if known)

17-23687

Do multiple creditors have an interest in the same property?  
 No  
 Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:  
 Check all that apply  
 Contingent  
 Unliquidated  
 Disputed

2.2  
9 **First Source Bank** \$207,276.00 Unknown

Creditor's Name

**PO Box 783**  
**South Bend, IN 46624**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**3/1/17**

Last 4 digits of account number

**4291**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2016 International Odyssey, VIN**  
**1FVACW2CDT2GHHA5691**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply  
 Contingent  
 Unliquidated  
 Disputed

2.3  
0 **GM Financial/Jerry Seiner** \$59,000.00 \$35,510.00

Creditor's Name

**PO Box 183593**  
**Arlington, TX 76096-3834**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**6/15/16**

Last 4 digits of account number

**8609**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2016 Cadillac CT6, VIN 1G6KK5R66GU154855**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply  
 Contingent  
 Unliquidated  
 Disputed

2.3  
1 **Key Equipment Finance** \$487,350.00 Unknown

Creditor's Name

**11030 Circle Point Rd Ste**  
**200**  
**Broomfield, CO 80020**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2017 J4500, VIN 2MG3JMBA1HW067920**

Describe the lien

Debtor All Resort Group, Inc.  
Name

Case number (if known)

17-23687

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

- No
- Yes

Is anyone else liable on this claim?

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**2346**

Do multiple creditors have an interest in the same property?

- No
- Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.3	<b>Key Equipment Finance</b>	<b>\$487,350.00</b>	<b>Unknown</b>
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Creditor's Name

**11030 Circle Point Rd Ste  
200  
Broomfield, CO 80020**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2017 J4500, VIN 2MG3JMBA7HW067923**

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**2346**

Do multiple creditors have an interest in the same property?

- No
- Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

- No
- Yes

Is anyone else liable on this claim?

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.3	<b>Lincoln/Ford Credit</b>	<b>Unknown</b>	<b>\$4,203.00</b>
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Creditor's Name

**?**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**7350**

Do multiple creditors have an interest in the same property?

Describe debtor's property that is subject to a lien

**2013 Lincoln MKT, VIN  
2LMHJ5NKODBL59120**

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**7350**

Do multiple creditors have an interest in the same property?

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

- No
- Yes

Is anyone else liable on this claim?

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Debtor All Resort Group, Inc.

Case number (if known)

17-23687

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Contingent  
 Unliquidated  
 Disputed

2.3 4	<b>Lincoln/Ford Credit</b>	Describe debtor's property that is subject to a lien	<b>Unknown</b>	<b>\$4,203.00</b>
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Creditor's Name

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**7328**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

2.3 5	<b>People's Capital Leasing Corp.</b>	Describe debtor's property that is subject to a lien	<b>\$429,925.00</b>	<b>\$385,200.00</b>
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Creditor's Name

**255 Bank St 4th Fl  
Waterbury, CT 06702-2213**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**4/6/15**

Last 4 digits of account number

**2356,h003**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

2.3 6	<b>People's Capital Leasing Corp.</b>	Describe debtor's property that is subject to a lien	<b>Unknown</b>	<b>Unknown</b>
----------	---------------------------------------	------------------------------------------------------	----------------	----------------

Creditor's Name

**255 Bank St 4th Fl  
Waterbury, CT 06702-2213**

Creditor's mailing address

Describe the lien

**(1) used 2006 MCI Model J4500 Motor Coach equipped with wheel chair lift, VIN**

**2M93JMDA46W063524**

**[66 x \$4,805.00, \$28,200 payoff]**

Debtor All Resort Group, Inc.  
Name

Case number (if known)

17-23687

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

- No
- Yes

Is anyone else liable on this claim?

- No
- Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.3  
7 **People's Capital Leasing Corp.**

Creditor's Name

**255 Bank St 4th Fl  
Waterbury, CT 06702-2213**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**5/26/15**

Last 4 digits of account number

**2356,h002**

Do multiple creditors have an interest in the same property?

- No

- Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**New 2015 MCI Model J4500 56 passenger Motor Coach, VIN 2MG3JMBA0FW067243  
[83 x \$5,559.25, \$96,369.25 payoff]**

**\$429,924.00**

**\$385,200.00**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

- No
- Yes

Is anyone else liable on this claim?

- No
- Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.3  
8 **People's Capital Leasing Corp.**

Creditor's Name

**255 Bank St 4th Fl  
Waterbury, CT 06702-2213**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**7/30/15**

Last 4 digits of account number

**2356,h004**

Do multiple creditors have an interest in the same property?

Describe debtor's property that is subject to a lien

**New 2015 MCI Model J4500 56 Passenger Motor Coach, VIN 2MG3JMBA4FW067293  
[83 x \$5,584.00, payoff \$96,394.00]**

**\$448,186.00**

**\$385,200.00**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

- No
- Yes

Is anyone else liable on this claim?

- No
- Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Debtor All Resort Group, Inc.

Case number (if known)

17-23687 No Yes. Specify each creditor, including this creditor and its relative priority.

Contingent  
 Unliquidated  
 Disputed

2.3 **People's Capital Leasing Corp.**

Creditor's Name

**255 Bank St 4th Fl  
Waterbury, CT 06702-2213**

Creditor's mailing address

Creditor's email address, if known

**Date debt was incurred****Last 4 digits of account number  
6002****Do multiple creditors have an interest in the same property?** No Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2011 T2145, VIN YE2TC19B0B2044754****\$69,120.00****\$307,200.00****Describe the lien****Note & Security Agreement w/ Title****Is the creditor an insider or related party?** No Yes**Is anyone else liable on this claim?** No Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**As of the petition filing date, the claim is:**

Check all that apply

Contingent  
 Unliquidated  
 Disputed

2.4 **People's Capital Leasing Corp.**

Creditor's Name

**255 Bank St 4th Fl  
Waterbury, CT 06702-2213**

Creditor's mailing address

Creditor's email address, if known

**Date debt was incurred****Last 4 digits of account number  
6001****Do multiple creditors have an interest in the same property?** No Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2009 J4500, VIN 2MG3JMHA09W065357****\$60,630.00****\$235,600.00****Describe the lien****Note & Security Agreement w/ Title****Is the creditor an insider or related party?** No Yes**Is anyone else liable on this claim?** No Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**As of the petition filing date, the claim is:**

Check all that apply

Contingent  
 Unliquidated  
 Disputed

2.4 **People's Capital Leasing Corp.**

Creditor's Name

**255 Bank St 4th Fl  
Waterbury, CT 06702-2213**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2011 T2145, VIN YE2TC19B6B2044757****\$74,880.00****\$307,200.00****Describe the lien****Note & Security Agreement w/ Title**

Debtor All Resort Group, Inc.  
Name

Case number (if known)

17-23687

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**6003**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.4  
2

**PNC**

Creditor's Name

**Attn: Service/Set Up Processing  
995 Dalton Ave  
Cincinnati, OH 45203**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**Unknown**

**Unknown**

**Unknown**

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**Unknown**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.4  
3

**Salt Lake County Treasurer**

Creditor's Name

**2001 S State St N1200  
Po Box 144575  
Salt Lake City, UT 84114**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**\$54,564.05**

**Unknown**

**Property taxes for 549 W 500 S, SLC, UT  
84101 (property held by Barron Wilson, LLC,  
but taxes to be paid per lease)**

Describe the lien

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

As of the petition filing date, the claim is:

Check all that apply

Debtor All Resort Group, Inc.

Case number (if known)

17-23687

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Contingent  
 Unliquidated  
 Disputed

2.4 4	<b>Sentry West, inc.</b> <hr/> Creditor's Name	Describe debtor's property that is subject to a lien	<b>\$0.00</b>	<b>Unknown</b>
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**940 Boston Turnpike  
Shrewsbury, MA 01545**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

**Unknown**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

2.4 5	<b>Signature Financial</b> <hr/> Creditor's Name	Describe debtor's property that is subject to a lien	<b>Unknown</b>	<b>Unknown</b>
----------	-----------------------------------------------------	------------------------------------------------------	----------------	----------------

**10545 Willows Rd NE Ste  
120  
Richmond, WA 98052**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**4166**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

2.4 6	<b>Signature Financial</b> <hr/> Creditor's Name	Describe debtor's property that is subject to a lien	<b>Unknown</b>	<b>Unknown</b>
----------	-----------------------------------------------------	------------------------------------------------------	----------------	----------------

**10545 Willows Rd NE Ste  
120  
Richmond, WA 98052**

Creditor's mailing address

**2002 30' Eldorado EX Rider Transit Bus, VIN  
1N9TDAC852C084164**

Describe the lien

**Note & Security Agreement w/ Title**

Debtor All Resort Group, Inc.

Name

Case number (if known)

17-23687

Creditor's email address, if known

**Is the creditor an insider or related party?**

- No
- Yes

**Is anyone else liable on this claim?**

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number

**4164**

Do multiple creditors have an interest in the same property?

- No
- Yes. Specify each creditor, including this creditor and its relative priority.

**As of the petition filing date, the claim is:**

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.4  
7

**Signature Financial**

Creditor's Name

**10545 Willows Rd NE Ste  
120**

**Richmond, WA 98052**

Creditor's mailing address

**Describe debtor's property that is subject to a lien**

**2002 30' Eldorado EX Rider Transit Bus, VIN  
1N9TDAC842C08416**

**Unknown**

**Unknown**

Creditor's email address, if known

**Describe the lien**

**Note & Security Agreement w/ Title**

**Is the creditor an insider or related party?**

- No
- Yes

**Is anyone else liable on this claim?**

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number

**4169**

Do multiple creditors have an interest in the same property?

- No
- Yes. Specify each creditor, including this creditor and its relative priority.

**As of the petition filing date, the claim is:**

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.4  
8

**Signature Financial**

Creditor's Name

**10545 Willows Rd NE Ste  
120**

**Richmond, WA 98052**

Creditor's mailing address

**Describe debtor's property that is subject to a lien**

**2002 30' Eldorado EX Rider Transit Bus, VIN  
1N9TDAC822C084171**

**Unknown**

**Unknown**

Creditor's email address, if known

**Describe the lien**

**Note & Security Agreement w/ Title**

**Is the creditor an insider or related party?**

- No
- Yes

**Is anyone else liable on this claim?**

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number

**4171**

Do multiple creditors have an interest in the same property?

**As of the petition filing date, the claim is:**

Check all that apply

Debtor All Resort Group, Inc.

Case number (if known)

17-23687

No

Yes. Specify each creditor, including this creditor and its relative priority.

- Contingent
- Unliquidated
- Disputed

2.4  
9

**Signature Financial**

Creditor's Name

**10545 Willows Rd NE Ste  
120  
Richmond, WA 98052**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**0378**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2000 30' Gillig Phantom Transit Bus, VIN  
15GCA181XY1110378**

**Unknown**

**Unknown**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.5  
0

**Signature Financial**

Creditor's Name

**10545 Willows Rd NE Ste  
120  
Richmond, WA 98052**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**0379**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2000 30' Gillig Phantom Transit Bus, VIN  
15GCA1881Y1110379**

**Unknown**

**Unknown**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.5  
1

**Signature Financial**

Creditor's Name

**10545 Willows Rd NE Ste  
120  
Richmond, WA 98052**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2000 30' Gillig Phantom Transit Bus, VIN  
15GCA1818Y1110380**

**Unknown**

**Unknown**

Describe the lien

**Note & Security Agreement w/ Title**

Debtor All Resort Group, Inc.  
Name

Case number (if known)

17-23687

Creditor's email address, if known

**Is the creditor an insider or related party?**

- No
- Yes

**Is anyone else liable on this claim?**

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number

**0380**

Do multiple creditors have an interest in the same property?

- No
- Yes. Specify each creditor, including this creditor and its relative priority.

**As of the petition filing date, the claim is:**

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.5  
2

**Signature Financial**

Creditor's Name

**10545 Willows Rd NE Ste  
120  
Richmond, WA 98052**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**0375**

Do multiple creditors have an interest in the same property?

- No
- Yes. Specify each creditor, including this creditor and its relative priority.

**Describe debtor's property that is subject to a lien**

**2000 30' Gillig Phantom Transit Bus, VIN  
15GCA1814Y1110375**

**Unknown**

**Unknown**

**Describe the lien**

**Note & Security Agreement w/ Title**

**Is the creditor an insider or related party?**

- No
- Yes

**Is anyone else liable on this claim?**

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

**As of the petition filing date, the claim is:**

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.5  
3

**Signature Financial**

Creditor's Name

**10545 Willows Rd NE Ste  
120  
Richmond, WA 98052**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**0376**

Do multiple creditors have an interest in the same property?

**Describe debtor's property that is subject to a lien**

**2000 30' Gillig Phantom Transit Bus, VIN  
15GCA18186Y1110376**

**Unknown**

**Unknown**

**Describe the lien**

**Note & Security Agreement w/ Title**

**Is the creditor an insider or related party?**

- No
- Yes

**Is anyone else liable on this claim?**

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

**As of the petition filing date, the claim is:**

Check all that apply

Debtor All Resort Group, Inc.

Case number (if known)

17-23687

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Contingent  
 Unliquidated  
 Disputed

2.5  
4

**Signature Financial**

Creditor's Name

**10545 Willows Rd NE Ste  
120  
Richmond, WA 98052**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**0377**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2000 30' Gillig Phantom Transit Bus, VIN  
15GCA1818Y1110377**

Unknown

Unknown

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

2.5  
5

**Signature Financial**

Creditor's Name

**10545 Willows Rd NE Ste  
120  
Richmond, WA 98052**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**0167**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2000 40' Gillig Phantom Transit Bus, VIN  
15GCD211XY1110167**

Unknown

Unknown

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

2.5  
6

**Signature Financial**

Creditor's Name

**10545 Willows Rd NE Ste  
120  
Richmond, WA 98052**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2000 40' Gillig Phantom Transit Bus, VIN  
15GCD2111Y1110168**

Unknown

Unknown

Describe the lien

**Note & Security Agreement w/ Title**

Debtor All Resort Group, Inc.  
Name

Case number (if known)

17-23687

Creditor's email address, if known

**Is the creditor an insider or related party?**

- No
- Yes

**Is anyone else liable on this claim?**

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number

**0168**

Do multiple creditors have an interest in the same property?

- No
- Yes. Specify each creditor, including this creditor and its relative priority.

**As of the petition filing date, the claim is:**

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.5  
7

**Signature Financial - BCA**

Creditor's Name

**10545 Willows Rd NE Ste  
120**

**Richmond, WA 98052**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**\$323,960.51**

**Unknown**

**2015 Coach BCA Model BCA45, VIN  
4B9000JCXFZ489004 [Bus No. 518]**

Creditor's email address, if known

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

- No
- Yes

**Is anyone else liable on this claim?**

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Date debt was incurred

**unknown**

Last 4 digits of account number

**3002**

Do multiple creditors have an interest in the same property?

- No
- Yes. Specify each creditor, including this creditor and its relative priority.

**As of the petition filing date, the claim is:**

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.5  
8

**Signature Financial - BCA**

Creditor's Name

**10545 Willows Rd NE Ste  
120**

**Richmond, WA 98052**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**Unknown**

**Unknown**

**2015 BCA Coach Model BCA45, VIN  
4B9000JCLPZ4B9005 [Bus No. 527]**

Creditor's email address, if known

Describe the lien

**Unknown**

Is the creditor an insider or related party?

- No
- Yes

**Is anyone else liable on this claim?**

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

**As of the petition filing date, the claim is:**

Check all that apply

Debtor All Resort Group, Inc.

Case number (if known)

17-23687

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Contingent  
 Unliquidated  
 Disputed

2.5 9	<b>Sun Trust</b> Creditor's Name	Describe debtor's property that is subject to a lien <b>2014 VanHool Coach Model TX45, VIN YE2YC11BXE2041110 [Bus No. 513] and 2014 VanHool Coach Model TX45, VIN YE2YC11B3E2041112 [bus No. 514]</b>	<b>\$620,635.00</b>	<b>\$978,000.00</b>
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**140 Main St  
Oxford, NC 27565**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**12/17/13**

Last 4 digits of account number

**8002**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

2.6 0	<b>Sun Trust</b> Creditor's Name	Describe debtor's property that is subject to a lien <b>2011 GCA Freightliner, VIN 4UZACPT3BCAZ8443</b>	<b>Unknown</b>	<b>Unknown</b>
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**140 Main St  
Oxford, NC 27565**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**8001**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

2.6 1	<b>TCF</b> Creditor's Name	Describe debtor's property that is subject to a lien <b>2011 J4500, VIN 2MG3JMHA0BW065901</b>	<b>\$253,750.34</b>	<b>\$299,300.00</b>
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**11100 Wayzata Blvd Ste  
801  
Minnetonka, MN 55305**

Creditor's mailing address

Describe the lien

Debtor All Resort Group, Inc.  
Name

Case number (if known)

17-23687

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

- No
- Yes

Is anyone else liable on this claim?

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- No
- Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.6  
2

**TCF**

Creditor's Name

**11100 Wayzata Blvd Ste  
801  
Minnetonka, MN 55305**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2015 Dodge RAM Ameritrans, VIN  
3C7WRMDL7DG598913**

**\$99,133.00**

**\$90,093.20**

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**558M,8100**

Do multiple creditors have an interest in the same property?

- No
- Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.6  
3

**TCF**

Creditor's Name

**11100 Wayzata Blvd Ste  
801  
Minnetonka, MN 55305**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2016 Dodge RAM Ameritrans, VIN  
3C7WRMDL8DG598919**

**\$129,114.00**

**\$121,940.15**

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**558m,8100**

Do multiple creditors have an interest in the same property?

As of the petition filing date, the claim is:

Check all that apply

Debtor All Resort Group, Inc.

Case number (if known)

17-23687

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Contingent  
 Unliquidated  
 Disputed

2.6  
4

**Webster Capital**

Creditor's Name

**344 Main St  
Kensington, CT 06037**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2015 BCA45, VIN 4B9000JCLPZ4B9005**

**Unknown**

**Unknown**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

2.6  
5

**Wells Fargo**

Creditor's Name

**NW-8178  
PO Box 1450  
55485-8178**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**4/28/16**

Last 4 digits of account number

**5704**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2011 MCI J4500 VIN 2MG3JMHA2BW065951**

**\$257,878.91**

**\$299,300.00**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

2.6  
6

**Wells Fargo**

Creditor's Name

**733 Marquette Ave  
N9306-070, Ste 700, FL107  
Minneapolis, MN 55402**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**(6) 2014 Ford E350 Super Shuttle Vans, VINs  
-61609, -61601, -61614, -61610, -61613, &  
-61602 (See VEHICLE FLEET LIST (p.5) for  
individual debts and values)**

**\$111,900.48**

**\$33,446.00**

Describe the lien

Debtor All Resort Group, Inc.  
Name

Case number (if known)

17-23687

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

2.6 7	<b>Wells Fargo Equipment Finance</b> Creditor's Name <b>733 Marquette Ave N9306-070, Ste 700, FL107 Minneapolis, MN 55402</b> Creditor's mailing address	Describe debtor's property that is subject to a lien <b>Equitable interest in 2015 Chevrolet Suburban LT, VIN 1GNSKJCKXFR506446</b>	<b>\$25,946.59</b>	<b>\$33,777.00</b>
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Creditor's email address, if known

Date debt was incurred

**3/11/15 (by Lewis Carriages, Inc.)**

Last 4 digits of account number

**2700**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

2.6 8	<b>Wells Fargo Equipment Finance</b> Creditor's Name <b>733 Marquette Ave N9306-070, Ste 700, FL107 Minneapolis, MN 55402</b> Creditor's mailing address	Describe debtor's property that is subject to a lien <b>2015 Ford Transit Connect Van, VIN 1FBVU4XG6FKA38578</b>	<b>\$20,130.64</b>	<b>\$21,416.00</b>
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Creditor's email address, if known

Date debt was incurred

**2/18/15**

Last 4 digits of account number

**OPCT**

Do multiple creditors have an interest in the same property?

Creditor's email address, if known

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

Debtor All Resort Group, Inc.

Case number (if known)

17-23687

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Contingent  
 Unliquidated  
 Disputed

**2.6  
9 Wells Fargo Equipment Finance**

Creditor's Name

**733 Marquette Ave  
N9306-070, Ste 700, FL107  
Minneapolis, MN 55402**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**6/1/16**

Last 4 digits of account number

**7100**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**(6) 2016 Cadillac Escalade ESVs, VIN  
#1GYS4HKJ6GR363338, -63363,  
-63373,-64769, -64912,  
#1GYS4HKJ1GR364753**

**Unknown**

**Unknown**

Describe the lien

**Trac lease**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

**2.7  
0 Wells Fargo Equipment Finance**

Creditor's Name

**733 Marquette Ave  
N9306-070, Ste 700, FL107  
Minneapolis, MN 55402**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**6/7/10**

Last 4 digits of account number

**5104**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2010 MCI J4500, VIN 2MG3JMEAXAW065553**

**\$55,474.50**

**\$259,800.00**

Describe the lien

**Note & Security Agreement w/ Title (TRAC)**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

**2.7  
1 Wells Fargo Equipment Finance**

Creditor's Name

**733 Marquette Ave  
N9306-070, Ste 700, FL107  
Minneapolis, MN 55402**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2011 J4500, VIN 2MG3JMHA6BW065899**

**\$253,750.34**

**\$299,300.00**

Describe the lien

Debtor All Resort Group, Inc.  
Name

Case number (if known)

17-23687

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**5703**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

**2.7 2 Wells Fargo Equipment Finance**

Creditor's Name

**733 Marquette Ave  
N9306-070, Ste 700, FL107  
Minneapolis, MN 55402**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2011 J4500, VIN 2MG3JMHA2BW065950**

**\$257,878.91**

**\$299,300.00**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**5704**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

**2.7 3 Wells Fargo Equipment Finance**

Creditor's Name

**733 Marquette Ave  
N9306-070, Ste 700, FL107  
Minneapolis, MN 55402**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2011 J4500, VIN 2MG3JMHA9BW065900**

**\$261,991.41**

**\$299,300.00**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No  
 Yes

Is anyone else liable on this claim?

No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**5705**

Do multiple creditors have an interest in the same property?

As of the petition filing date, the claim is:

Check all that apply

Debtor All Resort Group, Inc.

Case number (if known)

17-23687

No

Yes. Specify each creditor, including this creditor and its relative priority.

- Contingent
- Unliquidated
- Disputed

**2.7  
4 Wells Fargo Equipment Finance**

Creditor's Name

**733 Marquette Ave  
N9306-070, Ste 700, FL107  
Minneapolis, MN 55402**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**5700**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2008 J4500, 2M93JMHA78W064468**

**\$5,019.20**

**\$208,300.00**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

**2.7  
5 Wells Fargo Equipment Finance**

Creditor's Name

**733 Marquette Ave  
N9306-070, Ste 700, FL107  
Minneapolis, MN 55402**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**5103**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2010 J4500, VIN 2MG3JMEA8AW065552**

**\$55,470.50**

**\$259,800.00**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

**2.7  
6 Wells Fargo Equipment Finance**

Creditor's Name

**733 Marquette Ave  
N9306-070, Ste 700, FL107  
Minneapolis, MN 55402**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2011 J4500, VIN 2MG3JMHA1BW065910**

**\$120,797.00**

**\$299,300.00**

Describe the lien

**Note & Security Agreement w/ Title**

Debtor All Resort Group, Inc. \_\_\_\_\_ Case number (if known) 17-23687

Name

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**5106**

Do multiple creditors have an interest in the same property?

 No Yes. Specify each creditor, including this creditor and its relative priority.

Is the creditor an insider or related party?

 No Yes

Is anyone else liable on this claim?

 No Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.7 7	<b>Wells Fargo Equipment Finance</b>	<b>\$25,946.59</b>	<b>\$33,102.00</b>
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Creditor's Name

**733 Marquette Ave  
N9306-070, Ste 700, FL107  
Minneapolis, MN 55402**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**3/11/15 (by Lewis Carriages, Inc.)**

Last 4 digits of account number

**2700**

Do multiple creditors have an interest in the same property?

 No Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**Equitable interest in 2015 Chevrolet Suburban LT, VIN 1GNSKJJC5FR530332**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

 No Yes

Is anyone else liable on this claim?

 No Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.7 8	<b>Wells Fargo Equipment Finance</b>	<b>\$25,946.59</b>	<b>\$35,008.00</b>
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Creditor's Name

**733 Marquette Ave  
N9306-070, Ste 700, FL107  
Minneapolis, MN 55402**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**3/11/15 (by Lewis Carriages, Inc.)**

Last 4 digits of account number

**2700**

Do multiple creditors have an interest in the same property?

Describe debtor's property that is subject to a lien

**Equitable interest in 2015 Chevrolet Suburban LT, VIN 1GNSKJJC5FRS27253**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

 No Yes

Is anyone else liable on this claim?

 No Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Debtor All Resort Group, Inc.

Case number (if known)

17-23687

No

Yes. Specify each creditor, including this creditor and its relative priority.

- Contingent
- Unliquidated
- Disputed

**2.7  
9 Wells Fargo Equipment Finance**

Creditor's Name

**733 Marquette Ave  
N9306-070, Ste 700, FL107  
Minneapolis, MN 55402**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**5702**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2013 Ford/Federal Coach Spirit Shuttle Bus,  
VIN 1FKXE4FS0DDA36152**

**\$34,056.24**

**Unknown**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

**2.8  
0 Wells Fargo Equipment Finance**

Creditor's Name

**733 Marquette Ave  
N9306-070, Ste 700, FL107  
Minneapolis, MN 55402**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**5701**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2014 GCA Freightliner, VIN  
4UZACRDT1ECFL9509**

**\$51,783.32**

**Unknown**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

**2.8  
1 Wells Fargo Equipment Finance**

Creditor's Name

**733 Marquette Ave  
N9306-070, Ste 700, FL107  
Minneapolis, MN 55402**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**2014 Mercedes Meridian Sprinter, VIN  
WD3PF4CBXE5874085**

**\$34,056.24**

**Unknown**

Describe the lien

**Note & Security Agreement w/ Title**

Debtor All Resort Group, Inc.

Name

Case number (if known)

17-23687

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**5702**

Do multiple creditors have an interest in the same property?

 No Yes. Specify each creditor, including this creditor and its relative priority.

Is the creditor an insider or related party?

 No Yes

Is anyone else liable on this claim?

 No Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

**2.8    2    Wells Fargo Equipment Finance**

Creditor's Name

**733 Marquette Ave  
N9306-070, Ste 700, FL107  
Minneapolis, MN 55402**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**5703**

Do multiple creditors have an interest in the same property?

 No Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2011 J4500, VIN 2MG3JMHA0BW065901****\$253,750.34****\$299,300.00**

Describe the lien

**Note & Security Agreement w/ Title**

Is the creditor an insider or related party?

 No Yes

Is anyone else liable on this claim?

 No Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$7,731,785.6****2****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

**Evan S. Goldstein  
Updike, Kelly & Spellacy, P.C.  
100 Pearl St 17th Fl  
Hartford, CT 06123**Line 2.35**Mitchell D. Cohen  
VedderPrice  
1633 Broadway 31st Fl  
New York, NY 10019**Line 2.57

Debtor All Resort Group, Inc.  
Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

17-23687

**Wells Fargo**  
**Wells Fargo Bank**  
**Mac X2505-033 POB 10438**  
**Des Moines, IA 50306**

Line 2.65

Fill in this information to identify the case:

Debtor name All Resort Group, Inc.

United States Bankruptcy Court for the: DISTRICT OF UTAH

Case number (if known) 17-23687

Check if this is an amended filing

## Official Form 206E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

#### Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.  
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	<p>Priority creditor's name and mailing address  <b>Alpine Ski Properties</b>  <b>875 Ironhorse Ste D</b>  <b>PO Box 684289</b>  <b>Park City, UT 84068</b></p> <p>Date or dates debt was incurred  <b>1/21/17</b></p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim:  <b>Commissions</b></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$23.40</b> <b>\$23.40</b>
2.2	<p>Priority creditor's name and mailing address  <b>Altitude Home Concierge</b>  <b>1776 Park Ave #4-241</b>  <b>Park City, UT 84060</b></p> <p>Date or dates debt was incurred  <b>12/27/16 - 1/5/17</b></p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim:  <b>Commissions</b></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$1,697.67</b> <b>\$0.00</b>

Debtor	<u>All Resort Group, Inc.</u> Name	Case number (if known)	<u>17-23687</u>
2.3	<p>Priority creditor's name and mailing address  <b>Betsey Sancetta</b>  <b>2 Ward Ave</b>  <b>Wyckoff, NJ 07481</b></p> <p>Date or dates debt was incurred  <b>2/23/17</b></p> <p>Last 4 digits of account number  Specify Code subsection of PRIORITY  unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim:  <b>Commissions</b></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$23.85</b> <b>\$23.85</b>
2.4	<p>Priority creditor's name and mailing address  <b>Chateau Apres Lodge</b>  <b>1299 Norfolk</b>  <b>Park City, UT 84060</b></p> <p>Date or dates debt was incurred  <b>1/13/17 - 2/3/17</b></p> <p>Last 4 digits of account number  Specify Code subsection of PRIORITY  unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim:  <b>Commissions</b></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$48.80</b> <b>\$48.80</b>
2.5	<p>Priority creditor's name and mailing address  <b>Club Lespri</b>  <b>1765 Sidewinder Dr</b>  <b>Park City, UT 84060</b></p> <p>Date or dates debt was incurred  <b>12/23/16 - 2/20/17</b></p> <p>Last 4 digits of account number  Specify Code subsection of PRIORITY  unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim:  <b>Commissions</b></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$80.40</b> <b>\$0.00</b>
2.6	<p>Priority creditor's name and mailing address  <b>David Bekstrand</b>  <b>2121 Park Ave</b>  <b>PO Box 1778</b>  <b>Park City, UT 84060</b></p> <p>Date or dates debt was incurred  <b>1/16/17 - 2/20/17</b></p> <p>Last 4 digits of account number  Specify Code subsection of PRIORITY  unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim:  <b>Commissions</b></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$23.50</b> <b>\$23.50</b>

Debtor	<b>All Resort Group, Inc.</b>	Case number (if known)	<b>17-23687</b>	
2.7	<p>Priority creditor's name and mailing address  <b>DeRose Enterprises</b>  <b>2549 E Kensignton Ave</b>  <b>Salt Lake City, UT 84108</b></p> <p>Date or dates debt was incurred  <b>1/8/17 - 1/14/17</b></p> <p>Last 4 digits of account number  Specify Code subsection of PRIORITY  unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim:  <b>Commissions</b></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$28.62</b>	<b>\$28.62</b>
2.8	<p>Priority creditor's name and mailing address  <b>Destination hotels Utah</b>  <b>1456 newpark Blvd</b>  <b>Park City, UT 84098</b></p> <p>Date or dates debt was incurred  <b>12/21/16 - 2/12/17</b></p> <p>Last 4 digits of account number  Specify Code subsection of PRIORITY  unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim:  <b>Commissions</b></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$26.40</b>	<b>\$26.40</b>
2.9	<p>Priority creditor's name and mailing address  <b>Double C/Sky Ranch</b>  <b>6460 N Landmark Dr</b>  <b>Park City, UT 84060</b></p> <p>Date or dates debt was incurred  <b>12/26/16 - 2/2/17</b></p> <p>Last 4 digits of account number  Specify Code subsection of PRIORITY  unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim:  <b>Commissions</b></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$50.70</b>	<b>\$50.70</b>
2.10	<p>Priority creditor's name and mailing address  <b>Fast lane Luxury Travel</b>  <b>3980 Tampa Rd Ste 203</b>  <b>Oldsmar, FL 34677</b></p> <p>Date or dates debt was incurred  <b>3/16/17</b></p> <p>Last 4 digits of account number  Specify Code subsection of PRIORITY  unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim:  <b>Commissions</b></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$149.28</b>	<b>\$149.28</b>

Debtor

All Resort Group, Inc.

Name

Case number (if known)

17-23687

2.11	Priority creditor's name and mailing address <b>Hillary Caravaglia</b> <b>PO Box 2624</b> <b>Park City, UT 84060</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$131.10</b>	<b>\$131.10</b>
Date or dates debt was incurred <b>1/3/17 - 2/25/17</b>		Basis for the claim: <b>Commissions</b>		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Priority creditor's name and mailing address <b>Internal Revenue Service</b> <b>Central Insolvency Operations</b> <b>PO Box 7346</b> <b>Philadelphia, PA 19101</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>	<b>Unknown</b>
Date or dates debt was incurred <b>2916</b>		Basis for the claim: <b>Potential 2016 income taxes</b>		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Priority creditor's name and mailing address <b>John D. Love</b> <b>615 Woodside Ave</b> <b>Park City, UT 84060</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$38.50</b>	<b>\$38.50</b>
Date or dates debt was incurred <b>12/26/16 - 1/2/17</b>		Basis for the claim: <b>Commissions</b>		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Priority creditor's name and mailing address <b>Kevin Raggio</b> <b>4000 Canyons Resort Dr</b> <b>Park City, UT 84098</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$25.84</b>	<b>\$25.84</b>
Date or dates debt was incurred <b>12/18/16 - 1/24/17</b>		Basis for the claim: <b>Commissions</b>		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<u>All Resort Group, Inc.</u> Name	Case number (if known)	17-23687	
2.15	Priority creditor's name and mailing address <b>Linda Ryan</b> <b>PO Box 980482</b> <b>Park City, UT 84098</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$39.30</b>	<b>\$39.30</b>
	Date or dates debt was incurred  <b>1/1/17, 12/28/16</b>	Basis for the claim:  <b>Commissions</b> <b>15.90</b> <b>23.40</b>		
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.16	Priority creditor's name and mailing address <b>Lodges at Deer Valley</b> <b>2900 Deer Valley Dr</b> <b>Park City, UT 84060</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$146.00</b>	<b>\$146.00</b>
	Date or dates debt was incurred  <b>12/7/16 - 2/26/17</b>	Basis for the claim:  <b>Commissions</b>		
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.17	Priority creditor's name and mailing address <b>Luxury Park City Rentals</b> <b>PO box 904</b> <b>Park City, UT 84060</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$46.36</b>	<b>\$46.36</b>
	Date or dates debt was incurred  <b>12/16/16 - 1/14/17</b>	Basis for the claim:  <b>Commissions</b>		
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.18	Priority creditor's name and mailing address <b>Marriott Summitt Watch</b> <b>780 Main St</b> <b>Park City, UT 84060</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$133.12</b>	<b>\$133.12</b>
	Date or dates debt was incurred  <b>12/16/16 - 1/14/17</b>	Basis for the claim:  <b>Commissions</b>		
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Case number (if known)	17-23687
<b>All Resort Group, Inc.</b>		
Name		
2.19 Priority creditor's name and mailing address <b>Nevada Dept of Taxation</b> 2550 Paseo Verde Pkwy #180 Henderson, NV 89074	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$10,407.62</b> <b>\$10,407.62</b>
Date or dates debt was incurred ?	Basis for the claim: ?	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.20 Priority creditor's name and mailing address <b>Premier Property Services</b> 6300 N Sagewood Dr H-107 Park City, UT 84098	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$138.50</b> <b>\$138.50</b>
Date or dates debt was incurred <b>1/26/17 - 2/10/17</b>	Basis for the claim: <b>Commissions</b>	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.21 Priority creditor's name and mailing address <b>Salt Lake County Treasurer</b> Attn: Ray Lancaster PO Box 144575 Salt Lake City, UT 84114-4575	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$54,564.05</b> <b>\$54,564.05</b>
Date or dates debt was incurred	Basis for the claim: <b>Taxes</b>	
Last 4 digits of account number <b>1413</b> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.22 Priority creditor's name and mailing address <b>St. Regis</b> PO Box 4493 Park City, UT 84060	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$15.90</b> <b>\$15.90</b>
Date or dates debt was incurred <b>1/25/17</b>	Basis for the claim: <b>Commissions</b>	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	17-23687
2.23	<p>Priority creditor's name and mailing address  <b>State of Nevada</b>  <b>Attn: Jennifer Rodriguez</b>  <b>2550 Paseo Verde Pkwy Ste 180</b>  <b>Henderson, NV 89074</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>	<b>\$152,796.42</b> <b>\$152,796.42</b>
	<p>Date or dates debt was incurred  <b>2016 - 2017</b></p>	<p>Basis for the claim:  <b>Transport taxes</b></p>	
	<p>Last 4 digits of account number <b>2182</b>  Specify Code subsection of PRIORITY  unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	
2.24	<p>Priority creditor's name and mailing address  <b>State of Nevada</b>  <b>Attn: Jennifer Rodriguez</b>  <b>2550 Paseo Verde Pkwy Ste 180</b>  <b>Henderson, NV 89074</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>	<b>\$14,188.53</b> <b>\$14,188.53</b>
	<p>Date or dates debt was incurred  <b>2017</b></p>	<p>Basis for the claim:  <b>Modified Business Tax</b></p>	
	<p>Last 4 digits of account number <b>2182</b>  Specify Code subsection of PRIORITY  unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	
2.25	<p>Priority creditor's name and mailing address  <b>State of Utah - Division of Corporations</b>  <b>PO Box 146705</b>  <b>Salt Lake City, UT 84114-6705</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>	<b>\$30.00</b> <b>\$30.00</b>
	<p>Date or dates debt was incurred</p>	<p>Basis for the claim:</p>	
	<p>Last 4 digits of account number  Specify Code subsection of PRIORITY  unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	
2.26	<p>Priority creditor's name and mailing address  <b>State of Utah - Division of Corporations</b>  <b>PO Box 146705</b>  <b>Salt Lake City, UT 84114-6705</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>	<b>\$15.00</b> <b>\$15.00</b>
	<p>Date or dates debt was incurred</p>	<p>Basis for the claim:</p>	
	<p>Last 4 digits of account number  Specify Code subsection of PRIORITY  unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	

Debtor	<u>All Resort Group, Inc.</u> Name	Case number (if known)	<u>17-23687</u>
2.27	Priority creditor's name and mailing address <b>State of Wyoming</b> <b>Cheyenne, WY 82002</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$6,257.28</b> <b>\$6,257.28</b>
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.28	Priority creditor's name and mailing address <b>Travel Experts</b> <b>212 Sawmill Rd</b> <b>Raleigh, NC 27615</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$15.90</b> <b>\$15.90</b>
	Date or dates debt was incurred <b>2/10/17</b>	Basis for the claim: <b>Commissions</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.29	Priority creditor's name and mailing address <b>Treasure Mountain Inn</b> <b>PO box 1570</b> <b>Park City, UT 84060</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$12.92</b> <b>\$12.92</b>
	Date or dates debt was incurred <b>2/9/17 - 2/13/17</b>	Basis for the claim: <b>Commissions</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.30	Priority creditor's name and mailing address <b>Utah Adventure Concierge</b> <b>1781 Sidewinder Dr</b> <b>Park City, UT 84060</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$32.20</b> <b>\$32.20</b>
	Date or dates debt was incurred <b>1/4/17 - 2/25/17</b>	Basis for the claim: <b>Commissions</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>All Resort Group, Inc.</b>	Case number (if known)	<b>17-23687</b>
Name			
2.31	Priority creditor's name and mailing address <b>Utah State Tax Commission</b> <b>Attn Bankruptcy Unit</b> <b>210 North 1950 West</b> <b>Salt Lake City, UT 84134</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b> <b>Unknown</b>
		<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Date or dates debt was incurred <b>2016</b>			
Last 4 digits of account number			
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)			
2.32	Priority creditor's name and mailing address <b>Utah State Tax Commission - DMV</b> <b>PO Box 30412</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$2,492.25</b> <b>\$2,492.25</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Date or dates debt was incurred			
Basis for the claim:			
Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.33	Priority creditor's name and mailing address <b>Waldorf Astoria</b> <b>2100 Frostwood Ln</b> <b>Park City, UT 84098</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$3.80</b> <b>\$3.80</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Date or dates debt was incurred <b>12/18/16</b>			
Basis for the claim: <b>Commissions</b>			
Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.34	Priority creditor's name and mailing address <b>Zermatt</b> <b>784 W Resort Dr</b> <b>Midway, UT 84049</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$220.30</b> <b>\$220.30</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Date or dates debt was incurred <b>12/24/16 - 2/26/17</b>			
Basis for the claim: <b>Commissions</b>			
Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor	<u>All Resort Group, Inc.</u> Name	Case number (if known)	<u>17-23687</u>
3.1	Nonpriority creditor's name and mailing address  <b>1251 Kearns LLC</b> PO Box 683010 Park City, UT 84068	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,000.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Lease . . .</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address  <b>909Parkave.com</b> PO Box 980482 Park City, UT 84068	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$39.30</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3	Nonpriority creditor's name and mailing address  <b>ABC Companies - Parts IN</b> Po Box 856703 Minneapolis, MN 55485	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$11,086.86</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4	Nonpriority creditor's name and mailing address  <b>Accountemps</b> PO Box 743295 Los Angeles, CA 90074-3295	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$18,368.85</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5	Nonpriority creditor's name and mailing address  <b>Action Mobile Repair</b> 1145 S Richards St Salt Lake City, UT 84101	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$10,161.72</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6	Nonpriority creditor's name and mailing address  <b>AIRGAS USA, LLC</b> PO BOX 93500 Long Beach, CA 90809	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$577.71</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.7	Nonpriority creditor's name and mailing address  <b>Alarmco</b> 2007 Las Vegas Blvd South Las Vegas, NV 89104	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$240.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Utilities</u>	
	Last 4 digits of account number <u>R401</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<u>All Resort Group, Inc.</u> Name		Case number (if known)	<u>17-23687</u>
3.8	Nonpriority creditor's name and mailing address <b>Alpha Communication Sites, Inc.</b> 1202 S 300 W Salt Lake City, UT 84101		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$520.72</b>
			<input type="checkbox"/> Contingent	
			<input type="checkbox"/> Unliquidated	
			<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____		<b>Basis for the claim: Services or supplies</b>	
	Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.9	Nonpriority creditor's name and mailing address <b>Alpha Environmental Services</b> 3315 East Russell Road A-4 #210 Las Vegas, NV 89120		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$655.00</b>
			<input type="checkbox"/> Contingent	
			<input type="checkbox"/> Unliquidated	
			<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____		<b>Basis for the claim: Services or supplies</b>	
	Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.10	Nonpriority creditor's name and mailing address <b>Alpine Ski Properties</b> Po Box 684289 Park City, UT 84068		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$23.40</b>
			<input type="checkbox"/> Contingent	
			<input type="checkbox"/> Unliquidated	
			<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____		<b>Basis for the claim: Services or supplies</b>	
	Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.11	Nonpriority creditor's name and mailing address <b>Alscos Corp.</b> 3370 W 1820 S SALT LAKE CITY, UT 84104		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$789.93</b>
			<input type="checkbox"/> Contingent	
			<input type="checkbox"/> Unliquidated	
			<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____		<b>Basis for the claim: Services or supplies</b>	
	Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.12	Nonpriority creditor's name and mailing address <b>Altitude Home Concierge</b> Attn: Craig Owens 1776 Park Ave #4-241 Park City, UT 84060		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,697.67</b>
			<input type="checkbox"/> Contingent	
			<input type="checkbox"/> Unliquidated	
			<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____		<b>Basis for the claim: Services or supplies</b>	
	Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.13	Nonpriority creditor's name and mailing address <b>Altman Initiative Group, Inc</b> 4827 Buck's Bluff Drive North Myrtle Beach, SC 29582		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$420.00</b>
			<input type="checkbox"/> Contingent	
			<input type="checkbox"/> Unliquidated	
			<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____		<b>Basis for the claim: Services or supplies</b>	
	Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.14	Nonpriority creditor's name and mailing address <b>American Express</b> c/o Jaffe and Asher LLP 600 Third Ave New York, NY 10016		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$15,000.00</b>
			<input type="checkbox"/> Contingent	
			<input type="checkbox"/> Unliquidated	
			<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____		<b>Basis for the claim: Settlement</b>	
	Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<u>All Resort Group, Inc.</u> Name	Case number (if known)	<u>17-23687</u>
3.15	Nonpriority creditor's name and mailing address <b>American Limousine</b> <b>PO Box 283</b> <b>Orem, UT 84059</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Subcharter fees</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,600.00</b>
3.16	Nonpriority creditor's name and mailing address <b>AMS Towing</b> <b>233 Washington Blvd</b> <b>Ogden, UT 84404</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$540.00</b>
3.17	Nonpriority creditor's name and mailing address <b>Apparatus Equipment &amp; Service, Inc</b> <b>1103 South 700 West</b> <b>Salt Lake City, UT 84104</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,731.71</b>
3.18	Nonpriority creditor's name and mailing address <b>Aramark Uniform Services - Kennecott</b> <b>PO Box 101242</b> <b>PASADENA, CA 91189-0005</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,349.83</b>
3.19	Nonpriority creditor's name and mailing address <b>Aramark Uniform Services- SLC</b> <b>PO Box 101242</b> <b>PASADENA, CA 91189-0005</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,030.77</b>
3.20	Nonpriority creditor's name and mailing address <b>Arkin Winner &amp; Sherrod</b> <b>1117 S Rancho Dr</b> <b>Las Vegas, NV 89102</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Professional fees</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,222.57</b>
3.21	Nonpriority creditor's name and mailing address <b>Arrow State Lines, Inc. - Las Vegas</b> <b>60 Corporate Park Dr</b> <b>Henderson, NV 89074</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Subcharter fees</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$37,197.60</b>

Debtor	<u>All Resort Group, Inc.</u> Name	Case number (if known)	<u>17-23687</u>
3.22	Nonpriority creditor's name and mailing address <b>ASAP Automotive</b> <b>6990 S. State St</b> <b>Midvale, UT 84047</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,188.88</b>
3.23	Nonpriority creditor's name and mailing address <b>Aspen Mountain Partners, LLC</b> <b>264 Ranch Rd</b> <b>FARMINGTON, UT 84025</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,985.12</b>
3.24	Nonpriority creditor's name and mailing address <b>Associated Investments LLC</b> <b>PO Box 478</b> <b>Salt Lake City, UT 84110-0478</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Lease payments for warehouse space at 549 W 500 S, Salt Lake City, UT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,518.00</b>
3.25	Nonpriority creditor's name and mailing address <b>Associated Towing LLC</b> <b>PO Box 9963</b> <b>SALT LAKE CITY, UT 84109</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,636.50</b>
3.26	Nonpriority creditor's name and mailing address <b>Associatinbackgroundchecks.com</b> <b>1200 NW South Outer Road</b> <b>Blue Springs, MO 64015</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,467.90</b>
3.27	Nonpriority creditor's name and mailing address <b>Assurant Employee Benefits</b> <b>PO Box 807009</b> <b>Kansas City, MO 64184-7009</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Life insurance premiums</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.28	Nonpriority creditor's name and mailing address <b>AT&amp;T Mobility ACH</b> <b>MWBGEN</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>T401</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Utilities</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,629.12</b>

Debtor	<u>All Resort Group, Inc.</u> Name	Case number (if known)	<u>17-23687</u>
3.29	Nonpriority creditor's name and mailing address <b>Auto Owners Insurance</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Insurance premium for Lewis Building</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$799.82</b>
3.30	Nonpriority creditor's name and mailing address <b>Automated Business Products Company</b> PO Box 651006 Salt Lake City, UT 84165  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$169.68</b>
3.31	Nonpriority creditor's name and mailing address <b>Barron Wilson, LLC</b> 1500 Kearns Blvd Ste F300 PO box 681780 Park City, UT 84068  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Lease payments due for office at 549 W 500 S, Salt Lake City, UT 84101</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$12,038.74</b>
3.32	Nonpriority creditor's name and mailing address <b>Bell Janitorial Supply</b> 4464 West 2100 South, Suite A Salt Lake City, UT 84120  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,394.88</b>
3.33	Nonpriority creditor's name and mailing address <b>Best Western Landmark -Double Sky J</b> 6560 N Landmark Drive PARK CITY, UT 84060  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$50.71</b>
3.34	Nonpriority creditor's name and mailing address <b>Big O Tires</b> 178 E South Temple Salt Lake City, UT 84111  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$20,558.06</b>
3.35	Nonpriority creditor's name and mailing address <b>BKS Travel - Betsey Sancetta</b> 2 Ward Avenue Wyckoff, NJ 07481  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$23.85</b>

Debtor	<u>All Resort Group, Inc.</u> Name	Case number (if known)	<u>17-23687</u>
3.36	Nonpriority creditor's name and mailing address <b>Blue Bird Auto Rental Systems</b> <b>200 Mineral Springs Drive</b> <b>Dover, NJ 07801</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Services or supplies</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,498.00</b>
3.37	Nonpriority creditor's name and mailing address <b>Brent Carson, LLC</b> <b>7935 W Sahara Ave Ste 101</b> <b>Las Vegas, NV 89117</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Professional fees</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$207.50</b>
3.38	Nonpriority creditor's name and mailing address <b>Bridgestone Americas</b> <b>PO BOX 70249</b> <b>Chicago, IL 60673</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: _____</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,230.34</b>
3.39	Nonpriority creditor's name and mailing address <b>Brownell Travel</b> <b>216 Summit Boulevard, Suite 220</b> <b>Birmingham, AL 35243</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Services or supplies</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,129.10</b>
3.40	Nonpriority creditor's name and mailing address <b>Browz, LLC</b> <b>13997 S. Minuteman Dr.</b> <b>Ste. 350</b> <b>DRAPE, UT 84020</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Services or supplies</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$100.00</b>
3.41	Nonpriority creditor's name and mailing address <b>Bruno Group Signature Events</b> <b>8690 S Escalade Cir</b> <b>Salt Lake City, UT 84121</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Services or supplies</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$31,647.80</b>
3.42	Nonpriority creditor's name and mailing address <b>Burt Brothers</b> <b>737 North 400 West</b> <b>North Salt Lake, UT 84054</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: _____</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,708.26</b>

Debtor

All Resort Group, Inc.

Name

Case number (if known)

17-23687

3.43	<p>Nonpriority creditor's name and mailing address  <b>Bus Stop Service Corp</b>  <b>155 W Imperial Ave</b>  <b>LAS VEGAS, NV 89102-2537</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Services or supplies</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$385.00</b>
3.44	<p>Nonpriority creditor's name and mailing address  <b>Cactus &amp; Tropicals</b>  <b>2735 South 2000 East</b>  <b>Salt Lake City, UT 84109</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Services or supplies</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$62.00</b>
3.45	<p>Nonpriority creditor's name and mailing address  <b>Canyon Coach Lines</b>  <b>3525 W. Hacienda Ave</b>  <b>Las Vegas, NV 89118</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Services or supplies</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$14,943.36</b>
3.46	<p>Nonpriority creditor's name and mailing address  <b>Capital Premium</b>  <b>Hiscox Insurance Co., Inc. Risk Placemen</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>D&amp;O insurance premiums</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,600.00</b>
3.47	<p>Nonpriority creditor's name and mailing address  <b>CDW Direct LLC</b>  <b>300 N Milwaukee Ave</b>  <b>Vernon Hills, IL 60061</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Services or supplies</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$4,934.84</b>
3.48	<p>Nonpriority creditor's name and mailing address  <b>Central Parking System</b>  <b>AMF Box 22010</b>  <b>Salt Lake City, Ut 84122</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Services or supplies</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$4,632.00</b>
3.49	<p>Nonpriority creditor's name and mailing address  <b>Centura Bonanza Park LLC</b>  <b>PO Box 683010</b>  <b>Park City, UT 84068-3010</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Lease payments for . . .</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$3,000.00</b>

Debtor	<u>All Resort Group, Inc.</u> Name	Case number (if known)	<u>17-23687</u>
3.50	Nonpriority creditor's name and mailing address <b>Century Link 801-328-9105</b> PO Box 29040 Phoenix, AZ 85038-9040	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$318.83</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>T404</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Utilities</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.51	Nonpriority creditor's name and mailing address <b>Chateau Apres Lodge</b> 1299 Norfolk Park City, UT 84060	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$48.80</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.52	Nonpriority creditor's name and mailing address <b>ChemStation of Utah</b> 4464 West 2100 South, Suite A Salt Lake City, UT 84120	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$4,923.17</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.53	Nonpriority creditor's name and mailing address <b>Christian &amp; Barton LLP</b> 909 E Main St Ste 1200 Richmond, VA 23219	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$20,638.82</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Professional fees</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.54	Nonpriority creditor's name and mailing address <b>Cintas Corp #59 11342</b> PO Box 29059 Phoenix, AZ 85038	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$4,339.89</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.55	Nonpriority creditor's name and mailing address <b>Cintas Corporation # 0199</b> Po Box 631025 Cincinnati, OH 45263	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$2,436.50</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.56	Nonpriority creditor's name and mailing address <b>Cintas First Aid &amp; Safety</b> PO Box 631025 Cincinnati, OH 45263-1025	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$397.29</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<u>All Resort Group, Inc.</u>	Case number (if known)	<u>17-23687</u>
Name			
3.57	Nonpriority creditor's name and mailing address <b>City of North Las Vegas ACH</b> 2250 Las Vegas Blvd N Suite 250 North Las Vegas, NV 89030	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$47.42</b>
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<b>Basis for the claim: Utilities</b>		
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>Y402</u>		
3.58	Nonpriority creditor's name and mailing address <b>Claritysoft, LLC</b> PO BOX 43016 Dublin, OH 43016	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$3,407.50</b>
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<b>Basis for the claim: Services or supplies</b>		
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.59	Nonpriority creditor's name and mailing address <b>Clark County Dept of Aviation</b> Finance Division PO Box 11005 Las Vegas, NV 89111	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$6,727.10</b>
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<b>Basis for the claim: AVI airport fees</b>		
	Date(s) debt was incurred <u>2017</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.60	Nonpriority creditor's name and mailing address <b>Classic Tours</b> 972 Dalton Dr Las Vegas, NV 89119	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$77,515.00</b>
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<b>Basis for the claim: Subcharter fees</b>		
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.61	Nonpriority creditor's name and mailing address <b>Columbus Secure Document Solutions</b> 3495 South West Temple Salt Lake City, UT 84114	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$3,445.00</b>
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<b>Basis for the claim: Services or supplies</b>		
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.62	Nonpriority creditor's name and mailing address <b>Comcast</b> P. O. Box 34744 SEATTLE, WAA 98124-1744	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$982.26</b>
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<b>Basis for the claim: Utilities</b>		
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>C401</u>		
3.63	Nonpriority creditor's name and mailing address <b>Comcast 0432095</b> PO BOX 34744 Seattle, WA 98124-1744	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$250.78</b>
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<b>Basis for the claim: Utilities</b>		
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>C402</u>		

Debtor	<u>All Resort Group, Inc.</u>	Name	Case number (if known)	<u>17-23687</u>
3.64	Nonpriority creditor's name and mailing address <b>Comcast 0469212</b> PO BOX 34744 SEATTLE, WA 98124-1744	As of the petition filing date, the claim is: <i>Check all that apply.</i>		<b>\$229.18</b>
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date(s) debt was incurred _____ Last 4 digits of account number <u>C403</u>	<b>Basis for the claim: Utilities</b>		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.65	Nonpriority creditor's name and mailing address <b>Commercial Portfolio Advisors</b> 2027 Baxter Dr Heber City, UT 84032	As of the petition filing date, the claim is: <i>Check all that apply.</i>		<b>\$10,000.00</b>
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>Basis for the claim: Professional fees</b>		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.66	Nonpriority creditor's name and mailing address <b>Cox Business 128800641</b> Po Box 1259 Oaks, PA 19456	As of the petition filing date, the claim is: <i>Check all that apply.</i>		<b>\$1,127.81</b>
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date(s) debt was incurred _____ Last 4 digits of account number <u>X001</u>	<b>Basis for the claim: Utilities</b>		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.67	Nonpriority creditor's name and mailing address <b>Cox Business 128981001</b> Po Box 1259 Oaks, PA 19456	As of the petition filing date, the claim is: <i>Check all that apply.</i>		<b>\$299.90</b>
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date(s) debt was incurred _____ Last 4 digits of account number <u>X403</u>	<b>Basis for the claim: Utilities</b>		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.68	Nonpriority creditor's name and mailing address <b>Cox Communication, Inc - 120216201</b> Po Box 1259 Oaks, PA 19456	As of the petition filing date, the claim is: <i>Check all that apply.</i>		<b>\$1,946.24</b>
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date(s) debt was incurred _____ Last 4 digits of account number <u>C401</u>	<b>Basis for the claim: Utilities</b>		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.69	Nonpriority creditor's name and mailing address <b>Cox Communication, Inc 092613502</b> Po Box 1259 Oaks, PA 19456	As of the petition filing date, the claim is: <i>Check all that apply.</i>		<b>\$284.30</b>
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date(s) debt was incurred _____ Last 4 digits of account number <u>C402</u>	<b>Basis for the claim: Utilities</b>		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.70	Nonpriority creditor's name and mailing address <b>Culligan Las Vegas</b> 45143 North Lamb Blvd Las Vegas, NV 89115	As of the petition filing date, the claim is: <i>Check all that apply.</i>		<b>\$159.80</b>
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>Basis for the claim: Services or supplies</b>		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor

All Resort Group, Inc.

Name

Case number (if known)

17-23687

3.71	Nonpriority creditor's name and mailing address <b>CV PropCo, LLC</b> 4755 Dean Martin Dr Las Vegas, NV 89103	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$11,884.20</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u>Lease payments for 4740 S Valley View Blvd (Arena Conference Center), Las Vegas, NV</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.72	Nonpriority creditor's name and mailing address <b>CWT SatoTravel</b> 701 Carlson Parkway Mineetonna, MN 55305	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$8,267.27</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u>Services or supplies</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.73	Nonpriority creditor's name and mailing address <b>Dakota Bus Service, Inc.</b> PO Box 609	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,660.95</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u>Subcharter fees</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.74	Nonpriority creditor's name and mailing address <b>Dale Evans Construction</b> 150 4800 S Spearfish, SD 57783-0609	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$11,432.84</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u>Services or supplies</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.75	Nonpriority creditor's name and mailing address <b>Dana Warring</b> 9470 Samuel Clemens Ct Las Vegas, NV 89147	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$6,183.17</b>
	Date(s) debt was incurred <u>3/19/17 - 4/28/17</u>	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u>Unreimbursed expenses</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.76	Nonpriority creditor's name and mailing address <b>Davey Coach Sales</b> 7182 Reynolds Drive Sedalia, Co 80135	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$45.36</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u>Services or supplies</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.77	Nonpriority creditor's name and mailing address <b>DB Highrise Services</b> 9101 West Sahara Ave Las Vegas, NV 89117	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$260.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u>Services or supplies</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<u>All Resort Group, Inc.</u> Name		Case number (if known)	<u>17-23687</u>
3.78	Nonpriority creditor's name and mailing address <b>De Lage Financial Services, Inc.</b> PO box 41602 Philadelphia, PA 19101-1602	Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$381.27</b>
			Basis for the claim: <u>Lease . . .</u>	
			Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.79	Nonpriority creditor's name and mailing address <b>Dennis Brown</b> 3859 S Valley View Ste 2-187 Las Vegas, NV 89147	Date(s) debt was incurred <u>4/18/17</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$40.28</b>
			Basis for the claim: <u>Unreimbursed expenses</u>	
			Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.80	Nonpriority creditor's name and mailing address <b>DeRose Enterprises LC</b> 2549 E Kensington Ave Salt Lake City, UT 84108	Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$28.62</b>
			Basis for the claim: <u>Services or supplies</u>	
			Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.81	Nonpriority creditor's name and mailing address <b>DestinationTravel Network</b> 7458 N La Cholia Blvd Suite 100 Tucson, AZ 85741	Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$150.00</b>
			Basis for the claim: <u>Services or supplies</u>	
			Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.82	Nonpriority creditor's name and mailing address <b>Diamond Parking Service</b> Po Box 1391 Salt Lake City, UT 84110	Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,600.00</b>
			Basis for the claim: _____	
			Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.83	Nonpriority creditor's name and mailing address <b>Diamond Rental</b> 4518 South 500 West Salt Lake City, UT 84123	Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$873.03</b>
			Basis for the claim: <u>Services or supplies</u>	
			Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.84	Nonpriority creditor's name and mailing address <b>Distinctive Systems Inc.</b> 19531 Lost Creek Drive Estero, FL 33967-5510	Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$8,030.00</b>
			Basis for the claim: _____	
			Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<u>All Resort Group, Inc.</u>	Case number (if known)	<u>17-23687</u>
Name			
3.85	Nonpriority creditor's name and mailing address <b>Driftwood Autobody, LLC</b> 362 West 800 S Salt Lake City, UT 84101	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$25,896.03
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.86	Nonpriority creditor's name and mailing address <b>Dynamond Building Maintenance</b> 909 West 500 North Unit E Lindon, UT 84042	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,613.83
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Services or supplies</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.87	Nonpriority creditor's name and mailing address <b>EarthLimos.com</b> 2901 S Highland Drive, Unit 6G Las Vegas, NV 89109	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$57.44
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Services or supplies</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.88	Nonpriority creditor's name and mailing address <b>ECRM</b> MB: Press Camp ATTN: Tracey 27070 Miles Road Solon, OH 44139	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$199.90
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Services or supplies</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.89	Nonpriority creditor's name and mailing address <b>Eide Bailly, LLC</b> PO Box 2545 Fargo, ND 58108-2545	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$450.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Professional fees</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.90	Nonpriority creditor's name and mailing address <b>Enterprise Rent A Car</b> Po Box 402383 Atlanta, Ga 30384	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5,753.69
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Services or supplies</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.91	Nonpriority creditor's name and mailing address <b>Euro Treasures Properties II, LLC</b> 470 W 600 S Salt Lake City, UT 84101	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,350.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Lease payments for lot behind 470 W 600 S, Salt Lake City, UT 84101</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.92	Nonpriority creditor's name and mailing address <b>Event Promotion Supply</b> 4690 Joliet Street Denver, CO 80239	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$912.39</b>
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.93	Nonpriority creditor's name and mailing address <b>Express Auto Glass, Inc</b> PO BOX 637 West Jordan, UT 84084	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$534.25</b>
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.94	Nonpriority creditor's name and mailing address <b>Extra Space Storage</b> 2795 East Cottonwood Parkway Suite 400 Salt Lake City, UT 84121	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$546.00</b>
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.95	Nonpriority creditor's name and mailing address <b>Fast Lane Luxury Travel</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$149.28</b>
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.96	Nonpriority creditor's name and mailing address <b>FasTrak</b> PO BOX 26925 San Francisco, CA 94126	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$20.95</b>
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.97	Nonpriority creditor's name and mailing address <b>Federal Express</b> Po Box 7221 Pasadena, CA 91109	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,051.10</b>
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.98	Nonpriority creditor's name and mailing address <b>FirePro, LLC</b> PO BOX 620876 Las Vegas, NV 89162	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$841.80</b>
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.99	Nonpriority creditor's name and mailing address <b>First Bankcard</b> Po Box 2818 Omaha, NE 68103	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$325.64</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Services or supplies</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.100	Nonpriority creditor's name and mailing address <b>First Call</b> PO BOX 9464 Springfield, MO 65801-9464	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,263.79</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Services or supplies</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.101	Nonpriority creditor's name and mailing address <b>First Midwest Equipment Finance Co</b> 80 Gordon Street Elk Grove Village, IL 60007	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$3,026.80</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Services or supplies</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.102	Nonpriority creditor's name and mailing address <b>FIRSTMED</b> 441 South Redwood Road Salt Lake City, UT 84104	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$39.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Services or supplies</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.103	Nonpriority creditor's name and mailing address <b>FIRSTMED INDUSTRIAL CLINIC</b> PO BOX 307 Bountiful, UT 84011-0307	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$15.60</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Services or supplies</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.104	Nonpriority creditor's name and mailing address <b>Fleet Pride, Inc</b> PO BOX 847118 Dallas, TX 75284-7118	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$780.91</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Services or supplies</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.105	Nonpriority creditor's name and mailing address <b>Frank Sutitter Law Office</b> PO Box 4282 Salt Lake City, UT 84110	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$15,000.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Board of Directors' fee</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor All Resort Group, Inc.

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3.106	Nonpriority creditor's name and mailing address <b>Freedom Truck &amp; Trailer Parts, Inc</b> 1153 South 3600 West Salt Lake City, UT 84104	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$525.39</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.107	Nonpriority creditor's name and mailing address <b>Gabriella Hunter</b> 1035 South 1100 East Salt Lake City, UT 84105	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,062.50</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.108	Nonpriority creditor's name and mailing address <b>Gayos Antonia</b> 8851 Moonebeam Avenue Panorama City, CA 91402	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$2,400.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.109	Nonpriority creditor's name and mailing address <b>Global Telematic Solutions, LLC</b> 151 W Galvani Dr Ste 150 Meridian, ID 83642	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$13,140.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Services</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.110	Nonpriority creditor's name and mailing address <b>GM Financial</b> PO Box 183593 Arlington, TX 76096	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Vehicle lease</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.111	Nonpriority creditor's name and mailing address <b>Go To Citrix CC</b> Po Box 50264 Los Angeles, CA 90074	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$2,266.78</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Utilities</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.112	Nonpriority creditor's name and mailing address <b>Gold Coast Tours</b> 105 Gemini Ave Brea, CA 92821	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$7,400.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Subcharter fees</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.113	Nonpriority creditor's name and mailing address <b>Gordon Cummins</b> <b>6300 N Sagewood Dr Ste 127</b> <b>Park City, UT 84098</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$194,500.00</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.114	Nonpriority creditor's name and mailing address <b>Gordon Law Group P.C.</b> <b>345 W 600 S Ste 108</b> <b>Heber City, UT 84032</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$4,887.50</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Professional fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.115	Nonpriority creditor's name and mailing address <b>Grand Love Shack - John D Love</b> <b>615 Woodside Ave</b> <b>Park City, UT 84060</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$38.50</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Services or supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.116	Nonpriority creditor's name and mailing address <b>Granquist, James</b> <b>7559 Lincoln</b> <b>MIDVALE, UT 84047</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$230.00</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Services or supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.117	Nonpriority creditor's name and mailing address <b>Griffco Partners</b> <b>2800 S 400 W</b> <b>South Salt Lake, UT 84115</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$8,676.66</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Services or supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.118	Nonpriority creditor's name and mailing address <b>Hailesen Ray</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$6.00</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Services or supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.119	Nonpriority creditor's name and mailing address <b>Handi Van</b> <b>111 E Broadway Ste 250</b> <b>Salt Lake City, UT 84111</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,541.00</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Subcharter fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.120	<p>Nonpriority creditor's name and mailing address  <b>Hartford Fire Insurance Company</b>  <b>PO Box 731178</b>  <b>Dallas, TX 75373-1178</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>Insurance premiums for Property Flood Insurance for leased business premises at 549 W 500 S, Salt Lake City, UT</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,536.00</b>
3.121	<p>Nonpriority creditor's name and mailing address  <b>HealthEZ</b>  <b>7201 W 78th St</b>  <b>Bloomington, MN 55439</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>Insurance premiums</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$126,511.83</b>
3.122	<p>Nonpriority creditor's name and mailing address  <b>Hightech Signs</b>  <b>1201 South Redwood Road</b>  <b>Salt Lake City, UT 84104</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>Services or supplies</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$878.73</b>
3.123	<p>Nonpriority creditor's name and mailing address  <b>Hinckley's, Inc., dba Hincklease</b>  <b>Attn: Brian Baker</b>  <b>2305 S Presidents Dr Ste F</b>  <b>West Valley City, UT 84120</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>Lease payments</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$5,374.53</b>
3.124	<p>Nonpriority creditor's name and mailing address  <b>Hinckley's, Inc., dba Hincklease</b>  <b>Attn: Brian Baker</b>  <b>2305 S Presidents Dr Ste F</b>  <b>West Valley City, UT 84120</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>3740</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>Lease payments</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$15,658.16</b>
3.125	<p>Nonpriority creditor's name and mailing address  <b>Hinckley's, Inc., dba Hincklease</b>  <b>Attn: Brian Baker</b>  <b>2305 S Presidents Dr Ste F</b>  <b>West Valley City, UT 84120</b></p> <p>Date(s) debt was incurred <u>#4859</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>Lease payments</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$155,118.83</b>
3.126	<p>Nonpriority creditor's name and mailing address  <b>Hose &amp; Rubber Supply, Inc</b>  <b>Po Box 158</b>  <b>Randolph, UT 84064</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>Services or supplies</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$413.53</b>

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3.127	Nonpriority creditor's name and mailing address  <b>Hotel Park City</b> <b>2001 Park Ave</b> <b>Park City, Ut 84060</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$531.22</u>
3.128	Nonpriority creditor's name and mailing address  <b>Humana, Inc.</b> <b>PO Box 533</b> <b>Carol Stream, IL 60132-0533</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Insurance premiums</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$23,538.80</u>
3.129	Nonpriority creditor's name and mailing address  <b>Imagicom Corp.</b> <b>PO BOX 1724</b> <b>Layton, UT 84041</b>  Date(s) debt was incurred <u>2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Software support</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,300.00</u>
3.130	Nonpriority creditor's name and mailing address  <b>Industrial Supply</b> <b>Po Box 30600</b> <b>Salt Lake City, UT 84130</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$50.74</u>
3.131	Nonpriority creditor's name and mailing address  <b>Integra Telecom - 620687</b> <b>PO BOX 2966</b> <b>Milwaukee, WI 53201-2966</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>E406</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Utilities</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,430.44</u>
3.132	Nonpriority creditor's name and mailing address  <b>Integrity Fire Protection</b> <b>PO BOX 743</b> <b>Midvale, UT 84047</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$612.15</u>
3.133	Nonpriority creditor's name and mailing address  <b>Intermountain Electric</b> <b>1125 South 300 West</b> <b>Salt Lake City, Ut 84101</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$349.39</u>

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3.134	<p>Nonpriority creditor's name and mailing address  <b>International Motor Coach Group</b>  <b>8695 College Blvd</b>  <b>Overland Park, KS 66210</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$415.00</b>
3.135	<p>Nonpriority creditor's name and mailing address  <b>IPFS Corporation</b>  <b>24722 Network PI</b>  <b>Chicago, IL 60673</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Insurance premiums</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$11,115.36</b>
3.136	<p>Nonpriority creditor's name and mailing address  <b>Jaqulin Friend Peterson</b>  <b>675 E 2100 S</b>  <b>Salt Lake City, UT 84106</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Professional fees</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$11,000.00</b>
3.137	<p>Nonpriority creditor's name and mailing address  <b>Jerry Fox</b>  <b>5225 Camila Drive</b>  <b>Charlotte, NC 28226</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$5,950.00</b>
3.138	<p>Nonpriority creditor's name and mailing address  <b>Jerry Seiner</b>  <b>730 West 21st South</b>  <b>Salt lake City, UT 84119</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$348.82</b>
3.139	<p>Nonpriority creditor's name and mailing address  <b>Jiffy Lube</b>  <b>P. O. Box 620130</b>  <b>Middleton, WI 53562</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,938.66</b>
3.140	<p>Nonpriority creditor's name and mailing address  <b>JourneyTEAM</b>  <b>859 W South Jordan Parkway</b>  <b>Suite 100</b>  <b>South Jordan, UT 84095</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$6,611.25</b>

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3.141	Nonpriority creditor's name and mailing address <b>JSD 14-704</b> 2160 W 10400 S South Jordan, UT 84095	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$350.00</b>
	Date(s) debt was incurred <u>4/23/17</u>	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>1634</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Refund/discount for service failure</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.142	Nonpriority creditor's name and mailing address <b>Kaity Quinley</b> 2323 S 270 E Heber City, UT 84032	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$80,918.62</b>
	Date(s) debt was incurred <u>2016 - 2/2017</u>	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>_</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Unreimbursed expenses</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.143	Nonpriority creditor's name and mailing address <b>KeepItSafe, Inc - LiveVault</b> PO BOX 101748 Pasadena, CA 91189	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,966.08</b>
	Date(s) debt was incurred <u>_</u>	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>_</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.144	Nonpriority creditor's name and mailing address <b>Kemp Enterprises</b> 325 E 1875 S Springville, UT 84663	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,360.00</b>
	Date(s) debt was incurred <u>_</u>	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>_</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.145	Nonpriority creditor's name and mailing address <b>Kimball Arts Center CC</b> 1401 Kearns Blvd Park City, UT 84060	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$2,376.14</b>
	Date(s) debt was incurred <u>_</u>	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>_</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.146	Nonpriority creditor's name and mailing address <b>Kimball Midwest, Inc</b> Dept L-2780 Columbus, OH 43260-2780	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$2,402.63</b>
	Date(s) debt was incurred <u>_</u>	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>_</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.147	Nonpriority creditor's name and mailing address <b>KPCW</b> Po Box 1372 Park City, UT 84060	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,200.00</b>
	Date(s) debt was incurred <u>_</u>	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>_</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.148	<p>Nonpriority creditor's name and mailing address  <b>Kristin Spear Soiree Productions</b>  <b>8178 Gorgoza Pines Rd</b>  <b>Suite E</b>  <b>Park City, UT 84098</b>  Date(s) debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim: Services or supplies</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,000.00</b>
3.149	<p>Nonpriority creditor's name and mailing address  <b>Lamar Companies</b>  <b>PO Box 96030</b>  <b>Baton Rouge, LA 70896</b>  Date(s) debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim: Services or supplies</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$14,250.00</b>
3.150	<p>Nonpriority creditor's name and mailing address  <b>Landstar Ranger, Inc</b>  <b>1935 E Vine St</b>  <b>Murry, UT 84121</b>  Date(s) debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim: Services or supplies</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,578.87</b>
3.151	<p>Nonpriority creditor's name and mailing address  <b>Larry H Miller Ford 6557</b>  <b>1340 South 500 West</b>  <b>Salt Lake City, UT 84115</b>  Date(s) debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim: Services or supplies</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$782.01</b>
3.152	<p>Nonpriority creditor's name and mailing address  <b>Les Olson Company</b>  <b>Po Box 65598</b>  <b>Salt Lake City, Ut 84165</b>  Date(s) debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim: Services or supplies</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$3,627.33</b>
3.153	<p>Nonpriority creditor's name and mailing address  <b>Lespri - Club Lespri</b>  <b>1765 Sidewinder DR</b>  <b>Park City, UT 84060</b>  Date(s) debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim: Services or supplies</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$80.40</b>
3.154	<p>Nonpriority creditor's name and mailing address  <b>Lewis Peak Communications, INC</b>  <b>39 E 480 N</b>  <b>Coalville, UT 84017</b>  Date(s) debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim: Services or supplies</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,159.57</b>

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3.155	Nonpriority creditor's name and mailing address <b>Liberty Detail</b> <b>4001 Penwood Ave #31</b> <b>Las Vegas, NV 89102</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,165.00</u>
3.156	Nonpriority creditor's name and mailing address <b>Limo Anywhere</b> <b>1212 Corporate Dr</b> <b>Suite 380</b> <b>Irving, TX 75038</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$198.00</u>
3.157	Nonpriority creditor's name and mailing address <b>Limos.com CC</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$99.00</u>
3.158	Nonpriority creditor's name and mailing address <b>Lincoln Automotive Financial Services</b> <b>Po Box 54200</b> <b>Omaha, NE 68154</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,814.29</u>
3.159	Nonpriority creditor's name and mailing address <b>Lodges at Deer Valley</b> <b>2900 Deer Valley Dr E</b> <b>Park City, UT 84060</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$146.00</u>
3.160	Nonpriority creditor's name and mailing address <b>Lone Peak Valuation Group</b> <b>36 S State St Ste 500</b> <b>Salt Lake City, UT 84111</b>  Date(s) debt was incurred <u>2/2017</u> Last 4 digits of account number <u>2684</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Valuation services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$250.00</u>
3.161	Nonpriority creditor's name and mailing address <b>Lucky Limousine</b> <b>4195 W Diablo Dr</b> <b>Las Vegas, NV 89118</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Subcharter fees</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$11,483.16</u>

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3.162	Nonpriority creditor's name and mailing address <b>Luxury Park City Rentals</b> Po Box 904 Park City, UT 84060	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$46.36</b>
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.163	Nonpriority creditor's name and mailing address <b>Marriott Summit Watch</b> 780 Main St Park City, UT 84060	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$175.96</b>
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.164	Nonpriority creditor's name and mailing address <b>Martin Garage Doors of Nevada, LLC</b> 6667 Schuster Street Las Vegas,, NV 89118	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,073.50</b>
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.165	Nonpriority creditor's name and mailing address <b>Martinez, Cesar</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$48.00</b>
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.166	Nonpriority creditor's name and mailing address <b>Master Muffler&amp;Brake</b> 690 South Main Street Salt Lake City, UT 84101	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$107.95</b>
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Services or supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.167	Nonpriority creditor's name and mailing address <b>McCandless Intl Trucks</b> 3780 Losee Rd North Las Vegas, NV 89030	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$190.11</b>
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.168	Nonpriority creditor's name and mailing address <b>MCI Fleet Parts - KY</b> Lockbox 774764 4764 Solutions Center Chicago, IL 60677	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$22,322.48</b>
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Parts</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.169	Nonpriority creditor's name and mailing address <b>Merchants Automotice Group, Inc.</b> 12478 Hooksett Rd Hooksett, NH 03106	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$11,429.41</b>
Date(s) debt was incurred _____ Last 4 digits of account number _____		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.170	Nonpriority creditor's name and mailing address <b>Mike Verna</b> 2794 Sapphire Desert Dr Henderson, NV 89052	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,228.63</b>
Date(s) debt was incurred <u>4/25/17 - 4/26/17</u> Last 4 digits of account number _____		<b>Basis for the claim: Unreimbursed expenses</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.171	Nonpriority creditor's name and mailing address <b>Mike Wilhelm</b> PO box 4092 Park City, UT 84060	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$685.72</b>
Date(s) debt was incurred <u>4/3/17 - 4/29/17</u> Last 4 digits of account number _____		<b>Basis for the claim: Unreimbursed expenses</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.172	Nonpriority creditor's name and mailing address <b>Mogul Ski World</b> Level 1, 464 High Street Prahran, Vic, 3181 Australia	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$97.80</b>
Date(s) debt was incurred <u>4/15/17</u> Last 4 digits of account number <u>4373</u>		<b>Basis for the claim: Refund for overpayment</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.173	Nonpriority creditor's name and mailing address <b>Momar, Inc</b> 1830 Ellsworth Industrial Dr NW Atlanta, GA 30318	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,122.90</b>
Date(s) debt was incurred _____ Last 4 digits of account number _____		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.174	Nonpriority creditor's name and mailing address <b>Mountain Express Magazine, LLC (P)</b> 1910 Prospector Ave #200 Park City, UT 84060	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,645.00</b>
Date(s) debt was incurred _____ Last 4 digits of account number _____		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.175	Nonpriority creditor's name and mailing address <b>Mountain Vacation Management -Hilary Car</b> PO Box 2624 Park City, UT 84060	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$131.10</b>
Date(s) debt was incurred _____ Last 4 digits of account number _____		<b>Basis for the claim: Services or supplies</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.176	<p>Nonpriority creditor's name and mailing address  <b>Mountain West Communications</b>  <b>123 W 1St St</b>  <b>Casper, Wy 82601</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$85.43</b>
3.177	<p>Nonpriority creditor's name and mailing address  <b>MSEC</b>  <b>Po Box 539</b>  <b>Dener, Co 80201</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$260.00</b>
3.178	<p>Nonpriority creditor's name and mailing address  <b>MSHA</b>  <b>Po Box 790390</b>  <b>St Louis, MO 63179</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$0.00</b>
3.179	<p>Nonpriority creditor's name and mailing address  <b>Myers Tire Supply</b>  <b>Po Box 100169</b>  <b>Pasadena, CA 91189</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,968.22</b>
3.180	<p>Nonpriority creditor's name and mailing address  <b>NAPA Auto Parts</b>  <b>File 56893</b>  <b>Los Angeles, CA 90074</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$358.03</b>
3.181	<p>Nonpriority creditor's name and mailing address  <b>National Interstate Insurance/Philadelphia</b>  <b>c/o TransCap Insurance Agency, LLC</b>  <b>6260 McLeod Dr</b>  <b>Las Vegas, NV 89120</b></p> <p>Date(s) debt was incurred <u>4/19/17</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Insurance premiums for non-TRAX leases</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$61,959.00</b>
3.182	<p>Nonpriority creditor's name and mailing address  <b>New Life, LLC</b>  <b>610 Thimble Shoals Blvd</b>  <b>#404</b>  <b>Newport News, VA 23606</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$4,409.20</b>

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3.183	<b>Nonpriority creditor's name and mailing address</b> <b>NewPark Hotel</b> <b>1476 Newpark Boulevard</b> <b>Park City, UT 84098</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$26.40</b>
3.184	<b>Nonpriority creditor's name and mailing address</b> <b>Niederhouser Davis, LLC</b> <b>1741 Sidewinder Dr Ste 200</b> <b>Park City, UT 84060</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Professional fees</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,388.43</b>
3.185	<b>Nonpriority creditor's name and mailing address</b> <b>NVEnergy #12292708</b> <b>Po Box 10100</b> <b>Reno, NV 89520</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>N403</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Utilities</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$324.29</b>
3.186	<b>Nonpriority creditor's name and mailing address</b> <b>NVEnergy #12292922</b> <b>Po Box 10100</b> <b>Reno, NV 89520</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>N402</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Utilities</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$658.16</b>
3.187	<b>Nonpriority creditor's name and mailing address</b> <b>Obregon Simon</b> <b>1135 Nocturne Dr</b> <b>Salt Lake City, UT 84116</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$84.92</b>
3.188	<b>Nonpriority creditor's name and mailing address</b> <b>Office Furniture Exchange</b> <b>257 West 500 South</b> <b>Salt Lake City, UT 84101</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,129.19</b>
3.189	<b>Nonpriority creditor's name and mailing address</b> <b>OI Miner Partners, LLC (P)</b> <b>P.O. Box 683010</b> <b>PARK CITY, UT 84068</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$259.75</b>

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3.190	<p>Nonpriority creditor's name and mailing address  <b>Oreilly Auto Parts - SLC</b>  <b>Po Box 9464</b>  <b>Springfield, MO 65801</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$7,227.94</b>
3.191	<p>Nonpriority creditor's name and mailing address  <b>Pacific Office Automation</b>  <b>14747 NW Greenbrier Pkwy</b>  <b>Beaverton, OR 97006</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$2,260.18</b>
3.192	<p>Nonpriority creditor's name and mailing address  <b>Park City Area Lodging</b>  <b>P.O. Box 4256</b>  <b>Park City, UT 84060</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$0.00</b>
3.193	<p>Nonpriority creditor's name and mailing address  <b>Park City Chamber</b>  <b>P.O. Box 1630</b>  <b>Park City, UT 84060</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,085.00</b>
3.194	<p>Nonpriority creditor's name and mailing address  <b>Park City Hostel - Utah Adventure Concierge</b>  <b>1781 Sidewinder Dr</b>  <b>Park City, UT 84060</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$32.20</b>
3.195	<p>Nonpriority creditor's name and mailing address  <b>Park City Investors</b>  <b>6440 S Wasatch Blvd #100</b>  <b>Salt Lake City, UT 84121</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Lease payments for office space at Park Meadows Plaza, 1500 Kearns Blvd Stes F-100, F-200, and F-300</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$23,245.52</b>
3.196	<p>Nonpriority creditor's name and mailing address  <b>Park City Peaks Hotel - David Bekstrand</b>  <b>Po Box 1778</b>  <b>Park City, UT 84060</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$23.50</b>

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3.197	Nonpriority creditor's name and mailing address <b>Park Record</b> <b>P.O. Box 3688</b> <b>Park City, UT 84060</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$352.80</u>
3.198	Nonpriority creditor's name and mailing address <b>PC Printink</b> <b>1733 Sidewinder Dr</b> <b>#A</b> <b>Park City, UT 84060</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$85.28</u>
3.199	Nonpriority creditor's name and mailing address <b>Philadelphia Indemnity Insurance Company</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Insurance premiums</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$15,971.25</u>
3.200	Nonpriority creditor's name and mailing address <b>PMA Insurance Group</b> <b>PO Box 3031</b> <b>Blue Bell, PA 19422</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Insurance premiums</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$13,235.70</u>
3.201	Nonpriority creditor's name and mailing address <b>Praxair Distribution, Inc</b> <b>Po Box 120812</b> <b>Dept 0812</b> <b>Dallas, Tx 75312</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$384.23</u>
3.202	Nonpriority creditor's name and mailing address <b>Premier Property Services</b> <b>6300 N Sagewood Dr</b> <b>H-107</b> <b>Park City, UT 84098</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$138.50</u>
3.203	Nonpriority creditor's name and mailing address <b>Presidential Limousine</b> <b>2000 S Industrial Rd</b> <b>Las Vegas, NV 89102</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$67.98</u>

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3.204 Nonpriority creditor's name and mailing address <b>Private Ops</b> 5693 S Redwood Rd #13 Taylorsville, UT 84123		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$175.00
Date(s) debt was incurred _____ Last 4 digits of account number _____		<b>Basis for the claim: Services or supplies</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.205 Nonpriority creditor's name and mailing address <b>Progressive Reporting Agency, LLC (S)</b> 7304 South 300 West Ste 201 Midvale, UT 84047		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$4,807.50
Date(s) debt was incurred _____ Last 4 digits of account number _____		<b>Basis for the claim: Services or supplies</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.206 Nonpriority creditor's name and mailing address <b>Pure Water Partners</b> Dept CH 19648 Paiantine, IL 60055		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$282.51
Date(s) debt was incurred _____ Last 4 digits of account number _____		<b>Basis for the claim: Services or supplies</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.207 Nonpriority creditor's name and mailing address <b>Quality Towing, Inc</b> P. O. Box 365079 LAS VEGAS, NV 89036		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$5,009.55
Date(s) debt was incurred _____ Last 4 digits of account number _____		<b>Basis for the claim: Services or supplies</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.208 Nonpriority creditor's name and mailing address <b>Questar Gas ACH 8048310000</b> Po Box 45841 Salt Lake City, UT 84139		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$868.82
Date(s) debt was incurred _____ Last 4 digits of account number <u>S403</u>		<b>Basis for the claim: Utilities</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.209 Nonpriority creditor's name and mailing address <b>Ray Fasteners, Inc</b> 734 W 1355 S SALT LAKE CITY, UT 84104		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$3,220.84
Date(s) debt was incurred _____ Last 4 digits of account number _____		<b>Basis for the claim: Services or supplies</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.210 Nonpriority creditor's name and mailing address <b>Ray Quinney &amp; Nebeker PC</b> 36 State St Ste 1400 SALT LAKE CITY, UT 84111		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$5,413.00
Date(s) debt was incurred _____ Last 4 digits of account number _____		<b>Basis for the claim: Services or supplies</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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3.211	Nonpriority creditor's name and mailing address <b>REDLEE/SCS INC.</b> 515 E 100 S Ste 130 Salt Lake City, UT 84105  Date(s) debt was incurred _____  Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Services or supplies</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$13,750.94</b>
3.212	Nonpriority creditor's name and mailing address <b>REVCO Leasing, LLC (P)</b> Po Box 65598 Salt Lake City, UT 84165  Date(s) debt was incurred _____  Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Services or supplies</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,080.48</b>
3.213	Nonpriority creditor's name and mailing address <b>Rhinehart Oil Co, Inc.</b> P. O. Box 418 AMERICAN FORK, UT 84003  Date(s) debt was incurred _____  Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: _____</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,165.42</b>
3.214	Nonpriority creditor's name and mailing address <b>Richard Bizzaro</b> 20700 Northridge Rd Northridge, CA 91311  Date(s) debt was incurred _____  Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Loan</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$220,000.00</b>
3.215	Nonpriority creditor's name and mailing address <b>River City Petroleum</b> 3775 N Freeway STE 101 Sacramento, CA 95834  Date(s) debt was incurred _____  Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: _____</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,498.46</b>
3.216	Nonpriority creditor's name and mailing address <b>Road Rebel Entertainment Tours</b> 2141 5th Avae SAN DIEGO, CA 92101  Date(s) debt was incurred _____  Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Services or supplies</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$180.00</b>
3.217	Nonpriority creditor's name and mailing address <b>Robbi Gouveia</b> 6650 W Warm Springs Rd #2057 Las Vegas, NV 89115  Date(s) debt was incurred <u>4/20/17</u>  Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Unreimbursed expenses</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$20.00</b>

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3.218	Nonpriority creditor's name and mailing address <b>Robin Salazar</b> 7251 Zana Ln Magna, UT 84044	Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$55,000.00
3.219	Nonpriority creditor's name and mailing address <b>Rocky Mountain Care Clinic</b> 1775 S 4130 W #A SALT LAKE CITY, UT 84104	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Settlement of lawsuit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,877.25
3.220	Nonpriority creditor's name and mailing address <b>Romaine Electric, Inc</b> Po Box 5069 Kent, WA 98064	Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,017.53
3.221	Nonpriority creditor's name and mailing address <b>Ron Turley Associates</b> 17473 N 71st Dr #110 Glendale, AZ 85308	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Services or supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,690.00
3.222	Nonpriority creditor's name and mailing address <b>Royce Industries</b> 1355 West 8040 South WEST JORDAN, UT 84088	Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,532.21
3.223	Nonpriority creditor's name and mailing address <b>Rush Truck Center CC</b> 964 South 3800 West Salt Lake City, UT 84104	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Services or supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,293.69
3.224	Nonpriority creditor's name and mailing address <b>Ryan's Express Las Vegas</b> 412 E Gowan Rd North Las Vegas, NV 89032	Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,749.84
			Basis for the claim: <u>Subcharter fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.225	<p>Nonpriority creditor's name and mailing address  <b>Safety-Kleen Systems, Inc LV</b>  <b>Po Box 650509</b>  <b>Dallas, TX 75265</b></p> <p>Date(s) debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,666.57</b>
3.226	<p>Nonpriority creditor's name and mailing address  <b>Safety-Kleen Systems, Inc.KUC</b>  <b>Po Box 650509</b>  <b>Dallas, TX 75265</b></p> <p>Date(s) debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$892.50</b>
3.227	<p>Nonpriority creditor's name and mailing address  <b>Safety-Kleen Systems, Inc.SLC</b>  <b>Po Box 650509</b>  <b>Dallas, TX 75265</b></p> <p>Date(s) debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$5,327.76</b>
3.228	<p>Nonpriority creditor's name and mailing address  <b>Salt Lake Chamber</b>  <b>175 E 400 S</b>  <b>Salt Lake City, UT 84111</b></p> <p>Date(s) debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$500.00</b>
3.229	<p>Nonpriority creditor's name and mailing address  <b>Salt Lake City Corporation</b>  <b>Po Box 30881</b>  <b>Salt Lake City, UT 84130</b></p> <p>Date(s) debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$199.00</b>
3.230	<p>Nonpriority creditor's name and mailing address  <b>Salt Lake City Corporation</b>  <b>Po Box 30881</b>  <b>Salt Lake City, UT 84130</b></p> <p>Date(s) debt was incurred <u>2/2017 - 4/2017</u>  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Automated Vehicle Identification fees</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$57,273.70</b>
3.231	<p>Nonpriority creditor's name and mailing address  <b>Salt Lake City Department of Airports</b>  <b>Po Box 145550</b>  <b>Salt Lake City, UT 84114-5550</b></p> <p>Date(s) debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$329.00</b>

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3.232	<p>Nonpriority creditor's name and mailing address  <b>Saucon Technologies, Inc.</b>  <b>2455 Baglyos Circle</b>  <b>Bethlehem, PA 18020</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim: Services or supplies</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$240.00</b>
3.233	<p>Nonpriority creditor's name and mailing address  <b>Scheaffer Manufacturing Company</b>  <b>102 Barton St</b>  <b>Saint Louis, MO 63104</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim: Services or supplies</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$18,364.84</b>
3.234	<p>Nonpriority creditor's name and mailing address  <b>Serv A Cup</b>  <b>P. O. Box 521006</b>  <b>Salt Lake City, UT 84152-1006</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim: Services or supplies</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$685.77</b>
3.235	<p>Nonpriority creditor's name and mailing address  <b>Shannon Freeman</b>  <b>6315 W Kapford Dr</b>  <b>West Valley City, UT 84128</b></p> <p>Date(s) debt was incurred <u>4/22/17 - 4/24/17</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim: Unreimbursed expenses</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$115.32</b>
3.236	<p>Nonpriority creditor's name and mailing address  <b>Silver State Truck &amp; Trailer</b>  <b>3701 Freightliner Dr</b>  <b>North Las Vegas, NV 89081</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim: Services or supplies</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$23,926.38</b>
3.237	<p>Nonpriority creditor's name and mailing address  <b>Sinclair Fleet Track</b>  <b>Po Box 6293</b>  <b>Carol Stream, IL 60197</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim: Services or supplies</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$12,604.24</b>
3.238	<p>Nonpriority creditor's name and mailing address  <b>Skaggs</b>  <b>Po Box 150242</b>  <b>Ogden, Ut 84115</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim: Services or supplies</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$838.36</b>

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3.239	Nonpriority creditor's name and mailing address <b>Skyline Boys Lacrosse</b> 3084 Blaebell Dr Salt Lake City, UT 84124  Date(s) debt was incurred <u>4/19/17</u>  Last 4 digits of account number <u>1473</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Refund for no service</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$412.50</b>
3.240	Nonpriority creditor's name and mailing address <b>SLC Depart of Airports-341303, Corp</b> Po Box 145550 Salt Lake City, Ut 84114  Date(s) debt was incurred _____  Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,923.79</b>
3.241	Nonpriority creditor's name and mailing address <b>SLC DEPT 378901</b> Po Box 145550 Salt Lake City, Ut 84114  Date(s) debt was incurred _____  Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,974.61</b>
3.242	Nonpriority creditor's name and mailing address <b>SLC Dept of Airports 12825 Security Thre</b> Po Box 145550 Salt Lake City, Ut 84114  Date(s) debt was incurred _____  Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$162.00</b>
3.243	Nonpriority creditor's name and mailing address <b>SLC Dept of Airports 341399 Telephone, C</b> Po Box 145550 Salt Lake City, Ut 84114  Date(s) debt was incurred _____  Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$952.90</b>
3.244	Nonpriority creditor's name and mailing address <b>SLC Dept. 378901</b> PO Box 145550 Salt Lake City, UT 84114  Date(s) debt was incurred _____  Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,974.61</b>
3.245	Nonpriority creditor's name and mailing address <b>SLC Dept. of Airports (Booth)</b> PO Box 145550 Salt Lake City, UT 84114-5550  Date(s) debt was incurred _____  Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Lease of booths at SLC International Airport</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,258.73</b>

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3.246	<p>Nonpriority creditor's name and mailing address  <b>SLC Dept. of Airports-341303, Corp</b>  <b>PO Box 145550</b>  <b>Salt Lake City, UT 84114</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$10,923.79</b>
3.247	<p>Nonpriority creditor's name and mailing address  <b>Smarte Carte Inc</b>  <b>4455 White Bear Parkway</b>  <b>St Paul, MN 55110</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$4,710.00</b>
3.248	<p>Nonpriority creditor's name and mailing address  <b>Smith Coaches</b>  <b>PO Box 951</b>  <b>Price, UT 84501</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Subcharter fees</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$7,691.09</b>
3.249	<p>Nonpriority creditor's name and mailing address  <b>Smith Power Products, Inc.</b>  <b>Po Box 27527</b>  <b>Salt Lake City, UT 84127</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$35.55</b>
3.250	<p>Nonpriority creditor's name and mailing address  <b>Smith's</b>  <b>1550 S Redwood Rd</b>  <b>Salt Lake City, UT 84104</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$0.00</b>
3.251	<p>Nonpriority creditor's name and mailing address  <b>Snow Christensen &amp; Martineau</b>  <b>10 Exchange Pl</b>  <b>Salt Lake City, UT 84111</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Professional fees</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$27,856.77</b>
3.252	<p>Nonpriority creditor's name and mailing address  <b>Snowcreek Medical Center</b>  <b>1600 Snow Creek Dr</b>  <b>Park City, Ut 84060</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$9,705.00</b>

Debtor	<u>All Resort Group, Inc.</u> Name	Case number (if known)	<u>17-23687</u>
3.253	Nonpriority creditor's name and mailing address <b>South Fork Hardware</b> <b>1727 Sidewinder Dr</b> <b>Park City, UT 84060</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Services or supplies</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.254	Nonpriority creditor's name and mailing address <b>Spader Business Management</b> <b>2101 W 41st St</b> <b>#49</b> <b>SIOUX Falls, SD 57101</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Services or supplies</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.255	Nonpriority creditor's name and mailing address <b>Sparkletts &amp; Sierra Springs</b> <b>Po Box 660579</b> <b>Dallas, TX 75266-0579</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Services or supplies</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.256	Nonpriority creditor's name and mailing address <b>Spencer Lauber</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Reimbursement for damage to personal vehicle by Debtor's vehicle</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.257	Nonpriority creditor's name and mailing address <b>Sprint</b> <b>Po Box 629023</b> <b>EI Dorado Hills, CA 95762</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>1401</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Utilities</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.258	Nonpriority creditor's name and mailing address <b>SPRINTER</b> <b>2255 S 5370 W</b> <b>West Valley City, UT 84020</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Services or supplies</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.259	Nonpriority creditor's name and mailing address <b>Squire Higher Perspective</b> <b>1329 800 E</b> <b>Orem, UT 84097</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Services or supplies</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor All Resort Group, Inc.  
Name \_\_\_\_\_

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3.260	Nonpriority creditor's name and mailing address <b>St. Regis - COMM</b> <b>2300 Deer Valley Dr E</b> <b>Park City, UT 84060</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Services or supplies</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15.90</b>
3.261	Nonpriority creditor's name and mailing address <b>Staples Advantage</b> <b>Po Box 83689</b> <b>Dept LA</b> <b>Chicago, IL 60696</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Services or supplies</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,016.40</b>
3.262	Nonpriority creditor's name and mailing address <b>State Auto Insurance Companies</b> <b>PO Box 182738</b> <b>Columbus, OH 43218-2735</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Insurance premiums</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$261.00</b>
3.263	Nonpriority creditor's name and mailing address <b>Stewart Transportation Solutions</b> <b>2814 Columbine PI</b> <b>Nashville, TN 37204</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Subcharter fees</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$200.00</b>
3.264	Nonpriority creditor's name and mailing address <b>Storage on Wheels</b> <b>5085 Cecile Avenue</b> <b>Las Vegas, NV 89115</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Services or supplies</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$270.38</b>
3.265	Nonpriority creditor's name and mailing address <b>SWEETOURS Corp</b> <b>6363 S Pecos, Ste 106</b> <b>Las Vegas, NV 89120</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Services or supplies</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,980.15</b>
3.266	Nonpriority creditor's name and mailing address <b>Techna-Glass</b> <b>460 W 9000 S</b> <b>Sandy, UT 84070</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: Services or supplies</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,494.77</b>

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3.267	<b>Nonpriority creditor's name and mailing address</b> <b>The Safety Consortium</b> <b>400 Lawndale Dr</b> <b>Salt Lake City, Ut 84115</b>  <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,500.00</b>
3.268	<b>Nonpriority creditor's name and mailing address</b> <b>The Yarrow-Nicole Sharp</b> <b>1800 Park Ave</b> <b>Park City, UT 84060</b>  <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$75.00</b>
3.269	<b>Nonpriority creditor's name and mailing address</b> <b>Thomas Petroleum, LLC</b> <b>PO Box 677289</b> <b>Hicksville, OH 43526</b>  <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Fuel</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$90,751.17</b>
3.270	<b>Nonpriority creditor's name and mailing address</b> <b>Thought Lab</b> <b>56 East Broadway, Suite 200</b> <b>Salt Lake City, UT 84111</b>  <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$700.50</b>
3.271	<b>Nonpriority creditor's name and mailing address</b> <b>Tour Coach Charter &amp; Tours</b> <b>PO Box 911416</b> <b>Salt Lake City, UT 84111</b>  <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Subcharter fees</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,970.00</b>
3.272	<b>Nonpriority creditor's name and mailing address</b> <b>Traction Heavy Duty Parts</b> <b>PO Box 749986</b>  <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$303.73</b>
3.273	<b>Nonpriority creditor's name and mailing address</b> <b>Transamerica Life</b> <b>PO Box 30266</b> <b>LOS ANGELES, CA 90074-9986</b>  <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Services or supplies</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,543.53</b>

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3.274	<p>Nonpriority creditor's name and mailing address  <b>Translite Enterprises, Inc</b>  <b>107 Trumbull Street K Building</b>  <b>Las Vegas, NV 89120</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,300.00</b>
3.275	<p>Nonpriority creditor's name and mailing address  <b>Transportation Safety Systems</b>  <b>225 S Tower Ave</b>  <b>Centralia, WA 98531</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$4,110.00</b>
3.276	<p>Nonpriority creditor's name and mailing address  <b>Travel Experts</b>  <b>212 Sawmill Rd</b>  <b>Elizabeth, NJ 07206</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$15.90</b>
3.277	<p>Nonpriority creditor's name and mailing address  <b>Treasure Mountain Inn</b>  <b>PO Box 1570</b>  <b>Heber, UT 84032</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$12.92</b>
3.278	<p>Nonpriority creditor's name and mailing address  <b>Treasures &amp; Trends</b>  <b>1240 East 1950 North</b>  <b>Richfield, OH 44286</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$6,013.36</b>
3.279	<p>Nonpriority creditor's name and mailing address  <b>Trop Stop Gas &amp; Car Wash</b>  <b>4885 W Tropicana Ave</b>  <b>PASADENA, CA 91109-7167</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,279.31</b>
3.280	<p>Nonpriority creditor's name and mailing address  <b>U.S. Data Trust</b>  <b>PO Box 842605</b>  <b>Boston, MA 02284-2650</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>S402</u></p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Utilities</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$2,242.32</b>

Debtor	<u>All Resort Group, Inc.</u> Name		Case number (if known)	<u>17-23687</u>
3.281	Nonpriority creditor's name and mailing address <b>UCS Wireless</b> <b>8755 S. 300 W.</b> <b>BOSTON, MA 02284-2605</b>	Date(s) debt was incurred _____ Last 4 digits of account number <u>W401</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$20,928.82</b>
3.282	Nonpriority creditor's name and mailing address <b>United Site Services</b> <b>PO Box 53267</b> <b>Alexandria, VA 22314</b>	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$777.85</b>
3.283	Nonpriority creditor's name and mailing address <b>Utah Broadband</b> <b>461 Parkland Drive</b> <b>SALT LAKE CITY, UT 84114-4840</b>	Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,039.00</b>
3.284	Nonpriority creditor's name and mailing address <b>Utah Dept. of Workforce Svcs</b> <b>Unemployment Collections Unit</b> <b>PO Box 45288</b> <b>Salt Lake City, UT 84145-0288</b>	Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$70,306.63</b>
3.285	Nonpriority creditor's name and mailing address <b>Utah Media Group # 4001330532</b> <b>4770 S 5600 W</b> <b>West Valley City, UT 84210</b>	Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,506.11</b>
3.286	Nonpriority creditor's name and mailing address <b>Utah Safety Council</b> <b>1574 W 1700 S #2</b> <b>Salt Lake City, UT 84101-3502</b>	Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,075.00</b>
3.287	Nonpriority creditor's name and mailing address <b>Utah Tourism Industry Association</b> <b>175 South West Temple, Ste 140</b> <b>Salt Lake City, UT 84115</b>	Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$500.00</b>

Debtor	<u>All Resort Group, Inc.</u> Name		Case number (if known)	<u>17-23687</u>
3.288	Nonpriority creditor's name and mailing address <b>Utah Trailways, Inc.</b> 3091 S main St Salt Lake City, UT 84130		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$199.65</b>
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____		Basis for the claim: <u>Subcharter fees</u>	
	Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.289	Nonpriority creditor's name and mailing address <b>Utah.com</b> 55 N 300 W Ste 400 Salt Lake City, UT 84115		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$423.00</b>
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____		Basis for the claim: <u>Services or supplies</u>	
	Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.290	Nonpriority creditor's name and mailing address <b>Utah.com-DDM</b> 55 N 300 W Ste 400 SALT LAKE CITY, UT 84101		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$298.00</b>
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____		Basis for the claim: <u>Services or supplies</u>	
	Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.291	Nonpriority creditor's name and mailing address <b>Ute Cab Company, Inc</b> 738 South 400 West Salt Lake City, UT 84101		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$122.54</b>
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____		Basis for the claim: <u>Services or supplies</u>	
	Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.292	Nonpriority creditor's name and mailing address <b>Verizon Wireless ACH</b> ACH Las Vegas, NV 89178		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____		Basis for the claim: <u>Utilities</u>	
	Last 4 digits of account number <u>1401</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.293	Nonpriority creditor's name and mailing address <b>Visit Salt Lake</b> 90 South West Temple Murray, UT 84107		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$3,635.00</b>
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____		Basis for the claim: <u>Services or supplies</u>	
	Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.294	Nonpriority creditor's name and mailing address <b>Vista Transportation Safety Consulting</b> 89 Pondview LN Bristol, CT 06010		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$300.00</b>
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____		Basis for the claim: <u>Services or supplies</u>	
	Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor All Resort Group, Inc.  
Name

Case number (if known)

17-23687

3.295	<p>Nonpriority creditor's name and mailing address  <b>W.W. Williams Company, LLC</b>  <b>Po Box 772022</b>  <b>Detroit, MI 48277-2022</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$45,819.97</b>
3.296	<p>Nonpriority creditor's name and mailing address  <b>Waldorf-Astoria Park City -Christy Bambe</b>  <b>2100 W Frostwood Blvd</b>  <b>Detroit, MI 48277-2022</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$3.80</b>
3.297	<p>Nonpriority creditor's name and mailing address  <b>Warner Truck Center</b>  <b>2240 S 5370 W</b>  <b>Salt Lake City, UT 84110-1391</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$10,479.21</b>
3.298	<p>Nonpriority creditor's name and mailing address  <b>Wasatch-IP, A Professional Corp.</b>  <b>2825 E Cottonwood Pkwy Ste 500</b>  <b>Salt Lake City, UT</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Professional fees</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$8,155.00</b>
3.299	<p>Nonpriority creditor's name and mailing address  <b>Water Specialties, Inc.</b>  <b>4118 S 500 W</b>  <b>Park City, UT 84060</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,481.72</b>
3.300	<p>Nonpriority creditor's name and mailing address  <b>Wave Publishing Company Inc.</b>  <b>165 S 100 W</b>  <b>MURRAY, UT 84123</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$824.50</b>
3.301	<p>Nonpriority creditor's name and mailing address  <b>Westech Equipment</b>  <b>PO Box 57307</b>  <b>Salt Lake City, UT 84104</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services or supplies</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,209.50</b>

Debtor	<u>All Resort Group, Inc.</u>	Case number (if known)	<u>17-23687</u>
Name			
3.302	Nonpriority creditor's name and mailing address <b>Western Refining Wholesale</b> PO Box 749400 SALT LAKE CITY, UT 84157-0307	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$143.64</b>
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
<b>Basis for the claim: Services or supplies</b>			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
3.303	Nonpriority creditor's name and mailing address <b>Westgate Resort and Spa- Kevin Raggio</b> 4000 Canyons Resort Dr Park City, UT 84098	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$25.84</b>
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
<b>Basis for the claim: Services or supplies</b>			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
3.304	Nonpriority creditor's name and mailing address <b>Whitney Advertising &amp; Design Inc.</b> 6410 N. Business Park Loop Rd., Suite H	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$3,513.81</b>
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
<b>Basis for the claim: Services or supplies</b>			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
3.305	Nonpriority creditor's name and mailing address <b>Workers' Compensation Fund</b> PO Box 26488 Salt Lake City, UT 84111	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$56,382.78</b>
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
<b>Basis for the claim: Insurance premiums</b>			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
3.306	Nonpriority creditor's name and mailing address <b>WorkforceQA</b> 1430 South Main Street Las Vegas, NV 89117	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$170.00</b>
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
<b>Basis for the claim: Services or supplies</b>			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
3.307	Nonpriority creditor's name and mailing address <b>Workman Nydegger Property Attorneys PC</b> 1000 E Eagle Gate Tower 60 E South Temple Salt Lake City, UT 84115	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$80.00</b>
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
<b>Basis for the claim: Professional fees</b>			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
3.308	Nonpriority creditor's name and mailing address <b>Zermatt</b> 784 Resort Dr Midway, UT 84049	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$220.30</b>
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
<b>Basis for the claim: Services or supplies</b>			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

Debtor All Resort Group, Inc.

Name

Case number (if known)

17-23687

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 243,903.51
5b.	+ \$ 2,391,702.19
5c.	\$ 2,635,605.70

Fill in this information to identify the case:

Debtor name All Resort Group, Inc.

United States Bankruptcy Court for the: DISTRICT OF UTAH

Case number (if known) 17-23687

Check if this is an amended filing

## Official Form 206G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

**GoToAssist and GoToMeeting services**

State the term remaining

?

**Citrix**

?

List the contract number of any government contract

2.2. State what the contract or lease is for and the nature of the debtor's interest

**Master Receivables Purchase Agreement between All Resort Coach, Inc. dba lewis Stages for purchase of accounts receivable from Rio Tinto Kennecott Copper Cancellation by either party upon 30-days' notice**

**Deutsche Bank AG New York Branch  
60 Wall St 15th Fl  
New York, NY 10005**

State the term remaining

List the contract number of any government contract

2.3. State what the contract or lease is for and the nature of the debtor's interest

**See attached "SCHEDULE G - EMPLOYMENT AGREEMENTS" page \***

State the term remaining

List the contract number of any government contract

**EMPLOYMENT AGREEMENTS**

2.4. State what the contract or lease is for and the nature of the debtor's interest

**Internet services**

State the term remaining

**12/31/18**

**GoDaddy**  
?

List the contract number of any

Debtor 1 All Resort Group, Inc.

First Name

Middle Name

Last Name

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

government contract \_\_\_\_\_

2.5. State what the contract or lease is for and the nature of the debtor's interest

**See attached  
"SCHEDULE G -  
INSURANCE  
CONTRACTS" page \***

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**INSURANCE CONTRACTS**

2.6. State what the contract or lease is for and the nature of the debtor's interest

**Online software**

State the term remaining ?

**Microsoft Office 365**

List the contract number of any government contract \_\_\_\_\_

?

2.7. State what the contract or lease is for and the nature of the debtor's interest

**See attached  
"SCHEDULE G - LAND  
and BUILDING  
LEASES" page \***

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**REAL ESTATE LEASES**

2.8. State what the contract or lease is for and the nature of the debtor's interest

**Software backup system**

State the term remaining ?

**VaultLogix**

List the contract number of any government contract \_\_\_\_\_

?

2.9. State what the contract or lease is for and the nature of the debtor's interest

**See attached  
"SCHEDULE G -  
VEHICLE LEASES"  
page \***

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**VEHICLE LEASES**

Fill in this information to identify the case:

Debtor name All Resort Group, Inc.

United States Bankruptcy Court for the: DISTRICT OF UTAH

Case number (if known) 17-23687

Check if this is an amended filing

## Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

### 1. Do you have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 **All Resort Coach, Inc.**

**Wells Fargo**

D 2.66  
 E/F \_\_\_\_\_  
 G \_\_\_\_\_

2.2 **All Resort Group, Inc.**

**Wells Fargo**

D 2.66  
 E/F \_\_\_\_\_  
 G \_\_\_\_\_

2.3 **Gordon Cummins**

**6300 N Sagewood Dr Ste 127  
Park City, UT 84098**

**Signature Financial -  
BCA**

D 2.57  
 E/F \_\_\_\_\_  
 G \_\_\_\_\_

2.4 **Gordon Cummins**

**6300 N Sagewood Dr Ste 127  
Park City, UT 84098**

**Wells Fargo**

D 2.66  
 E/F \_\_\_\_\_  
 G \_\_\_\_\_

2.5 **Gordon Cummins**

**6300 N Sagewood Dr Ste 127  
Park City, UT 84098**

**Wells Fargo  
Equipment Finance**

D 2.67  
 E/F \_\_\_\_\_  
 G \_\_\_\_\_

Debtor

All Resort Group, Inc.

Case number (if known)

17-23687

**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.  
Column 1: Codebtor      Column 2: Creditor

2.6	Gordon Cummins	6300 N Sagewood Dr Ste 127 Park City, UT 84098	First Source Bank	<input checked="" type="checkbox"/> D <u>2.29</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.7	Gordon Cummins	6300 N Sagewood Dr Ste 127 Park City, UT 84098	People's Capital Leasing Corp.	<input checked="" type="checkbox"/> D <u>2.41</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.8	Lewis Carriages, Inc.		Wells Fargo	<input checked="" type="checkbox"/> D <u>2.66</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.9	Lewis Carriages, Inc.		Wells Fargo Equipment Finance	<input checked="" type="checkbox"/> D <u>2.67</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.10	Park City Transportation, Inc.		Wells Fargo	<input checked="" type="checkbox"/> D <u>2.66</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.11	Resort Express, Inc.		Wells Fargo	<input checked="" type="checkbox"/> D <u>2.66</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.12	Resort Express, Inc.		Wells Fargo Equipment Finance	<input checked="" type="checkbox"/> D <u>2.67</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.13	Resort Express, Inc.		First Source Bank	<input checked="" type="checkbox"/> D <u>2.29</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Debtor

All Resort Group, Inc.

Case number (if known)

17-23687

**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.14	Richard Bizzaro	20700 Northridge Rd Northridge, CA 91311	Signature Financial - BCA	<input checked="" type="checkbox"/> D <u>2.57</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.15	Richard Bizzaro	20700 Northridge Rd Northridge, CA 91311	Wells Fargo	<input checked="" type="checkbox"/> D <u>2.66</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.16	Richard Bizzaro	20700 Northridge Rd Northridge, CA 91311	Wells Fargo Equipment Finance	<input checked="" type="checkbox"/> D <u>2.67</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.17	Richard Bizzaro	20700 Northridge Rd Northridge, CA 91311	First Source Bank	<input checked="" type="checkbox"/> D <u>2.29</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.18	Richard Bizzaro	20700 Northridge Rd Northridge, CA 91311	People's Capital Leasing Corp.	<input checked="" type="checkbox"/> D <u>2.41</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Fill in this information to identify the case:

Debtor name **All Resort Group, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF UTAH**

Case number (if known) **17-23687**

Check if this is an amended filing

**Official Form 207**

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

**04/16**

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income**

**1. Gross revenue from business**

None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue  
Check all that apply

Gross revenue  
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:  
From **1/01/2017** to **Filing Date**

Operating a business

**\$11,764,741.52**

Other **Business operations**

For prior year:  
From **1/01/2016** to **12/31/2016**

Operating a business

**\$33,748,097.18**

Other **Business operations**

For year before that:  
From **1/01/2015** to **12/31/2015**

Operating a business

**\$34,565,670.00**

Other **Business operations**

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None.

Description of sources of revenue

Gross revenue from each source  
(before deductions and exclusions)

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer  
Check all that apply

Debtor All Resort Group, Inc.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer Check all that apply
3.1. See attached SCHEDULE "SOFA NO. 3"		\$0.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

 None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. See attached SCHEDULE "SOFA NO. 4" for details		\$0.00	

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

 None

Creditor's name and address	Describe of the Property	Date	Value of property

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

 None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount

**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

 None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. See attached SCHEDULE "SOFA NO. 7" (to be supplied)			<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

 None**Part 4: Certain Gifts and Charitable Contributions**

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

page 2

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	-------------------------------------------	-------------	-------

#### **Part 5: Certain Losses**

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

**TO BE SUPPLIED**

**Unknown**

#### **Part 6: Certain Payments or Transfers**

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.		\$55,000.00 retainer paid 4/20/17; \$26,240.00 applied to pre-petition services (4/4/17 - 4/26/17) on 4/27/17.	
Anna W. Drake, P.C. PO Box 581126 Salt Lake City, UT 84158-1126	\$53,283.00 legal services \$1,717.00 filing fee		\$55,000.00

Email or website address  
annadrake@att.net

Who made the payment, if not debtor?

Debtor

All Resort Group, Inc.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.2.  GlassRatner Advisory & Capital Group LLC 35 E 100 S Ste 1609 Salt Lake City, UT 84111		<u>Retainer paid 4/24/17; retainer applied pre-petition on 4/28/17</u>	<u>\$26,000.00</u>
 Email or website address <u>mthatcher@glassratner.com</u>			
 Who made the payment, if not debtor?			

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1.  Destination Services Company PO Box 3660 Avon, CO 81620	<u>DVIP, Inc., a wholly-owned subsidiary of All Resort Group, Inc., transferred all of its furniture, fixtures and equipment used in the DVIP business, the contents of two (2) storage units, all domain names owned or licensed to DVIP, certain contracts, and intangibles</u>	<u>6/15/17 (+ deferred revenue by 6/30/16)</u>	<u>\$1,200,000.00</u>
 Relationship to debtor <u>None</u>			

**13.2 TO BE SUPPLIED**Unknown

Relationship to debtor

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy From-To
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Debtor

All Resort Group, Inc.

Address	Dates of occupancy From-To
14.1. <b>470 W 600 S</b> <b>Salt Lake City, UT 84101</b>	<b>Limo yard (2010 - present)</b>
14.2. <b>534 S 500 W</b> <b>Salt Lake City, UT 84111</b>	<b>2011 - present</b>
14.3. <b>549 W 500 S</b> <b>Salt Lake City, UT 84101</b>	<b>2006 - present</b>
14.4. <b>1251 Kearns Blvd</b> <b>Park City, UT 84060</b>	<b>parking lot (unknown)</b>
14.5. <b>1500 Kearns Blvd</b> <b>Park City, UT 84060</b>	<b>2012 - present</b>
14.6. <b>2880 N Nellis Blvd</b> <b>Las Vegas, NV 89105</b>	<b>LV Limo (2012 - 2017)</b>
14.7. <b>4740 S Valley View Blvd</b> <b>Las Vegas, NV 89103</b>	<b>2016 - present</b>
14.8. <b>5428 W Leo Park Rd</b> <b>West Jordan, UT 84088</b>	<b>parking 2013 - 2017</b>
14.9. <b>5663 Oslo Ln</b> <b>Park City, UT 84098</b>	<b>2016 - present</b>

**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

No. Go to Part 9.  
 Yes. Fill in the information below.

**Facility name and address****Nature of the business operation, including type of services the debtor provides****If debtor provides meals and housing, number of patients in debtor's care****Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

No.  
 Yes. State the nature of the information collected and retained.

**Customers' credit card information is kept in the specific customer file in a filing cabinet in the accounting office in Park City.**

Does the debtor have a privacy policy about that information?

No  
 Yes

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

No. Go to Part 10.  
 Yes. Does the debtor serve as plan administrator?

Debtor

All Resort Group, Inc. No Go to Part 10. Yes. Fill in below:**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

 None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

 None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

 None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
Space Place Storage, fka Jordanelle Storage 4520 N Old Hwy 40 Heber City, UT 84032	Andrea Hansen	Financial information	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

 None

Owner's name and address	Location of the property	Describe the property	Value
Employees and mechanics	Offices	Employees may have personal property at their locations. Mechanics may have personal tools.	\$0.00

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly

Debtor All Resort Group, Inc.

owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

No.  
 Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

No.  
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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**24. Has the debtor notified any governmental unit of any release of hazardous material?**

No.  
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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**Part 13: Details About the Debtor's Business or Connections to Any Business**

**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. All Resort Coach, Inc. PO Box 681780 Park City, UT 84068	Transportation	Dates business existed EIN: 20-4202240 From-To 1/2006 - present (merged 4/27/17)
25.2. ARG Vehicle Service Center, LLC dba LV Service Center PO Box 681780 Park City, UT 84068	Vehicle service	EIN: None issued From-To 2/2017 - present (merged 4/27/17)
25.3. DVIP, Inc. PO Box 681780 Park City, UT 84068	Transportation	EIN: 27-1449152 From-To 11/2009 - 6/1/15
25.4. Lewis Carriages, Inc. PO Box 681780 Park City, UT 84068	Transportation	EIN: 47-2779161 From-To 2015 - present

Debtor All Resort Group, Inc.

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.5. Park City Transportation, Inc. PO Box 681780 Park City, UT 84068	Transportation	Dates business existed EIN: 26-4679128 From-To 5/2009 - present (merged 4/27/17)
25.6. Premier Transportation, Inc. PO Box 681780 Park City, UT 84068	Transportation	EIN: 42-1717242 From-To 10/2006 - present (merged 4/27/17)
25.7. Resort Express, Inc. PO Box 681780 Park City, UT 84068	Transportation	EIN: 87-0480238 From-To 11/1990 - present (merged 4/27/17)

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

 None

Name and address	Date of service From-To
26a.1. Brandon Fife 988 S 100 W Heber City, UT 84032	9/12 - 6/15
26a.2. Andrea Hansen 852 Somerset Dr North Salt Lake, UT 84054	10/16 - present
26a.3. Sharyle Lyons PO Box 3122 Salt Lake City, UT 84110	9/09 - 3/16
26a.4. Ryan Naegle 681 Northridge Dr Bountiful, UT 84010	6/15 - 4/16
26a.5. Jeff Pannabacker 1718 E Viewside Cr Hideout, UT 84036	5/16 - 10/16

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

 None

Name and address	Date of service From-To
26b.1. Neiderhauser & Davis, LLC PO Box 680460 Park City, UT 84068-0460	Yearly review 2012 - 2015

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

 None

Name and address	If any books of account and records are unavailable, explain why
26c.1. Debtor	

Debtor All Resort Group, Inc.

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

None

**Name and address****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No  
 Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
---------------------------------------------------------------	-------------------	------------------------------------------------------------------------------

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Gordon Cummins	6300 N Sagewood Dr Ste 127 Park City, UT 84098	Board of Directors Common stock	31.3%
Estate of Wendy Bizzaro	c/o Richard Bizzaro 20700 Northridge Rd Northridge, CA 91311	Shareholder	32.5%
Richard Bizzaro	20700 Northridge Rd Northridge, CA 91311	Board of Directors Common stock	32.2%
J.L. Killingsworth	5663 Oslo Ln Park City, UT 84098	President Common stock	2.0%
Donnie Novell	PO Box 680061 Park City, UT 84069	Common stock (former 20% owner of Park City Transportation, Inc. prior to merger)	2.0%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No  
 Yes. Identify below.

**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No  
 Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
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Debtor

All Resort Group, Inc.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 See attached SCHEDULE "SOFA NO. 4"			
Relationship to debtor			

## 31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

No  
 Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
All Resort Group, LLC	EIN: 27-4435207

## 32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

No  
 Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	----------------------------------------------------------

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.  
 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 21, 2017

/s/ J.L. Killingsworth

Signature of individual signing on behalf of the debtor

J.L. Killingsworth

Printed name

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

No  
 Yes

**PAYMENTS TO CREDITORS WITHIN 90 DAYS PRE-PETITION**

CREDITOR	AMOUNT	PURPOSE
<b>Access Business</b>	<b>710,875.42</b>	
2/17/2017	65,965.02	Factor Repayment
2/21/2017	929.75	Factor Repayment
2/22/2017	20,323.73	Factor Repayment
2/27/2017	47,238.55	Factor Repayment
3/6/2017	71,815.00	Factor Repayment
3/7/2017	85,200.74	Factor Repayment
3/9/2017	102,713.97	Factor Repayment
3/13/2017	52,252.48	Factor Repayment
3/29/2017	101,531.13	Factor Repayment
4/6/2017	55,823.97	Factor Repayment
4/21/2017	28,921.00	Factor Repayment
4/24/2017	71,595.66	Factor Repayment
4/27/2017	5,161.76	Factor Repayment
4/28/2017	1,402.66	Factor Repayment
<b>ABC Companies</b>	<b>39,668.94</b>	
2/10/17 Ck#0090	7,597.24	Parts
2/17/17 CK#0126	5,888.43	Parts
2/22/17 CK#0147	1,002.08	Parts
2/24/17 Ck#0150	5,013.28	Parts
3/2/17 Ck#0181	5,000.00	Parts
3/9/17 CK#0231	5,283.93	Parts
3/17/2017 Ck#0271	4,993.16	Parts
3/24/17 CK#0314	4,890.82	Parts
<b>ADP</b>	<b>40,883.97</b>	<b>Don't pay ADP through AP</b>
<b>AMAZON.COM DBT CRD</b>	<b>12,850.00</b>	<b>Employee Referrals</b>
1/23/2017	3,000.00	Employee Referrals
3/7/2017	2,950.00	Employee Referrals
3/20/2017	3,000.00	Employee Referrals
3/20/2017	2,850.00	Employee Referrals
4/12/2017	1,050.00	Employee Referrals
<b>AMERICAN EXPRESS AXP DISCNT</b>	<b>26,618.75</b>	<b>Credit Card Charg</b>
<b>Any Hour Service</b>	<b>9,454.00</b>	
2/7/2017	9,454.00	Building Repairs
<b>Apparatus Equipment</b>	<b>12,324.63</b>	

#90-Day Payments

Sheet1

1 of 11

**SOFA NO. 3**

5/19/2017 @ 8:14 PM

**PAYMENTS TO CREDITORS WITHIN 90 DAYS PRE-PETITION**

CREDITOR	AMOUNT	PURPOSE
	2/27/2017 1,515.62	Parts
	2/28/2017 10,000.00	Parts
	3/2/2017 850.00	Parts
<b>Assurant Insurance</b>	<b>26,901.48</b>	
	2/7/2017 26,901.48	Insurance
<b>Barron Wilson</b>	<b>28,461.26</b>	
	2/8/2017 13,500.00	Rents
	2/14/2017 1,461.26	Rents
	3/9/2017 13,500.00	Rents
<b>BMO HARRIS BANK</b>	<b>15,172.20</b>	
	4/7/2017 5,057.40	Vehicle Payment
	3/7/2017 5,057.40	Vehicle Payment
	2/7/2017 5,057.40	Vehicle Payment
<b>BOA Bankcard</b>	<b>92,360.30</b>	
	2/6/2017 48,830.38	Credit Card payment
	2/21/2017 40,745.42	Credit Card payment
	3/6/2017 2,784.50	Credit Card payment
<b>BOA LEASING</b>	<b>41,542.29</b>	<b>Don't have lease in GP</b>
<b>Burt Brothers</b>	<b>11,509.13</b>	
	3/2/2017 3,881.92	Parts & repairs
	3/1/2017 1,308.42	Parts & repairs
	2/28/2017 2,688.48	Parts & repairs
	2/24/2017 2,811.11	Parts & repairs
	2/17/2017 1,025.48	Parts & repairs
<b>Central Parking</b>	<b>8,472.00</b>	
	1/18/2017 2,904.00	airport parking
	3/17/2017 3,696.00	airport parking
	3/24/2017 1,872.00	airport parking
<b>Cody Bradley</b>		
	1/27/2017 7,225.10	
<b>Commercial Portfolio Advisors</b>	<b>14,987.50</b>	<b>consulting</b>

**PAYMENTS TO CREDITORS WITHIN 90 DAYS PRE-PETITION**

CREDITOR	AMOUNT	PURPOSE
<b>Commercial Advisors</b>	<b>7,600.00</b>	consulting
<b>CTS</b>	<b>71,031.66</b>	
<b>Cummins Rocky Mtn</b>	<b>28,100.51</b>	
2/24/2017	7,159.52	parts
3/2/2017	7,593.79	parts
3/9/2017	4,033.41	parts
3/17/2017	9,313.79	parts
<b>CV Prop Co</b>	<b>11,884.20</b>	
3/7/2017	11,884.20	rent
<b>D Warring</b>	<b>22,972.16</b>	
2/10/2017	1,462.45	Reimbursement
2/22/2017	900.00	Reimbursement
2/23/2017	6,610.71	Reimbursement
3/24/2017	4,153.92	Reimbursement
4/4/2017	1,248.48	Reimbursement
4/17/2017	5,725.35	Reimbursement
5/2/2017	2,871.25	Reimbursement
<b>Daimler Truck Finance</b>	<b>76,944.90</b>	Lease payments
<b>Driftwood Autobody</b>	<b>21,047.85</b>	
2/9/2017	7,374.80	bodywork
3/9/2017	6,888.28	bodywork
3/17/2017	6,784.77	bodywork
<b>Enterprise Rental</b>	<b>8,500.00</b>	
3/17/2017	500.00	car rentals
3/17/2017	4,000.00	car rentals
3/24/2017	4,000.00	car rentals
<b>Fall Line Capital</b>	<b>10,349.98</b>	
3/15/2017	10,349.98	
<b>Goodway Group</b>	<b>18,600.00</b>	
2/17/2017	18,600.00	Lawyer

**PAYMENTS TO CREDITORS WITHIN 90 DAYS PRE-PETITION**

CREDITOR	AMOUNT	PURPOSE
<b>HealthEZ</b>	<b>362,892.36</b>	
2/6/2017	127,000.00	Insurance
3/1/2017	123,361.11	Insurance
4/4/2017	112,531.25	Insurance
<b>Hinklease</b>	<b>95,178.76</b>	
2/27/2017	95,178.76	leases
<b>Humana</b>	<b>44,338.17</b>	
4/6/2017	18,663.50	Insurance
2/7/2017	25,674.67	Insurance
<b>Imagicom</b>	<b>17,925.00</b>	
2/21/2017	5,000.00	computer programer
3/2/2017	5,000.00	computer programer
3/13/2017	5,000.00	computer programer
3/15/2017	2,925.00	computer programer
<b>INDEED DBT CRD</b>	<b>11,919.28</b>	
2/10/2017	402.64	job ads
2/13/2017	504.32	job ads
2/16/2017	505.93	job ads
2/21/2017	505.36	job ads
2/21/2017	502.61	job ads
2/22/2017	500.13	job ads
3/1/2017	500.34	job ads
3/2/2017	114.99	job ads
2/23/2017	508.29	job ads
2/27/2017	502.42	job ads
2/27/2017	501.36	job ads
3/10/2017	507.96	job ads
3/15/2017	505.72	job ads
3/15/2017	534.83	job ads
3/16/2017	500.71	job ads
3/20/2017	505.47	job ads
3/20/2017	503.94	job ads
3/23/2017	514.64	job ads
3/24/2017	514.55	job ads
3/27/2017	510.22	job ads

**PAYMENTS TO CREDITORS WITHIN 90 DAYS PRE-PETITION**

CREDITOR	AMOUNT	PURPOSE
	3/27/2017 507.84	job ads
	3/28/2017 512.51	job ads
	4/5/2017 6.34	job ads
	4/5/2017 510.58	job ads
	4/20/2017 501.27	job ads
	5/1/2017 234.31	job ads
<b>Industrial Supply</b>	<b>28,437.33</b>	
	2/10/2017 7,556.26	safety equipment
	2/17/2017 5,846.83	safety equipment
	2/24/2017 4,976.73	safety equipment
	3/2/2017 5,032.38	safety equipment
	3/9/2017 2,642.83	safety equipment
	3/17/2017 2,382.30	safety equipment
<b>IPFS Corp</b>	<b>29,095.57</b>	
	2/3/2017 9,681.65	insurance
	3/21/2017 9,220.62	insurance
	4/14/2017 10,193.30	insurance
<b>Jaffe Amex</b>	<b>14,500.00</b>	
	2/17/2017 7,000.00	lawsuit payment
	3/23/2017 7,500.00	lawsuit payment
<b>Jaqualin Friend Peterson</b>	<b>11,000.00</b>	
	3/13/2017 11,000.00	lawsuit payment
<b>JRW Services</b>	<b>7,245.00</b>	
	3/6/2017 7,245.00	
<b>KEY EQUIPMENT FI LEASE</b>	<b>37,326.93</b>	<b>Lease payments</b>
<b>L Croutcher</b>	<b>7,940.57</b>	
	2/10/2017 1,189.57	Reimbursement
	2/15/2017 476.12	Reimbursement
	2/22/2017 1,225.29	Reimbursement
	2/27/2017 105.99	Reimbursement
	2/28/2017 43.24	Reimbursement
	3/3/2017 410.92	Reimbursement
	3/23/2017 1,080.99	Reimbursement

**PAYMENTS TO CREDITORS WITHIN 90 DAYS PRE-PETITION**

CREDITOR	AMOUNT	PURPOSE
	4/17/2017 2,349.55	Reimbursement
	4/28/2017 1,058.90	Reimbursement
<b>Les Olson</b>	<b>8,820.11</b>	
	3/17/2017 5,029.17	printers
	3/24/2017 3,790.94	printers
<b>Liberty Detail</b>	<b>15,750.00</b>	
	3/2/2017 7,020.00	Car Washing
	3/22/2017 8,730.00	Car Washing
<b>M Wilhelm</b>	<b>9,499.19</b>	
	2/10/2017 5,043.24	Rebursements
	3/24/2017 3,622.51	Rebursements
	4/17/2017 833.44	Rebursements
<b>Marcus Bundrant</b>	<b>6,523.44</b>	
	1/27/2017 6,523.44	
<b>Marriott Mountainside</b>	<b>14,602.50</b>	
	3/23/2017 14,602.50	Commissions
<b>MCI Fleet Parts</b>	<b>28,753.69</b>	
	2/17/2017 4,764.32	parts
	3/9/2017 4,478.34	parts
	3/17/2017 9,561.94	parts
	3/24/2017 4,853.31	parts
	4/6/2017 5,095.78	parts
<b>National Interstate</b>	<b>273,327.39</b>	
	1/31/2017 92,400.80	Insurance
	3/21/2017 60,438.22	Insurance
	4/17/2017 120,488.37	Insurance
<b>Niederhouser Davis</b>	<b>10,000.00</b>	
	3/1/2017 10,000.00	2015 tax prep
<b>Park City Investors</b>	<b>34,868.28</b>	
	2/8/2017 11,622.76	rent
	2/22/2017 11,622.76	rent

**PAYMENTS TO CREDITORS WITHIN 90 DAYS PRE-PETITION**

CREDITOR	AMOUNT	PURPOSE
	3/22/2017 11,622.76	rent
<b>PEOPLES CAP&amp;LEAS</b>	<b>111,417.20</b>	<b>Leases</b>
<b>PNC</b>	<b>LEASE PMT</b>	<b>14,952.00</b> Leases
<b>Progressive Reporting Agency</b>	<b>6,868.53</b>	
	2/27/2017 217.33	Titles and Taxes
	3/2/2017 724.20	Titles and Taxes
	42804 169.50	Titles and Taxes
	4/12/2017 5,757.50	Titles and Taxes
<b>Purcell Tire</b>	<b>25,459.91</b>	
	2/20/2017 4,466.41	tires
	2/24/2017 3,753.37	tires
	3/2/2017 4,691.72	tires
	3/9/2017 4,462.58	tires
	3/13/2017 4,691.72	tires
	3/24/2017 2,211.04	tires
	4/5/2017 1,104.24	tires
<b>Questar Gas Co.</b>	<b>9,744.52</b>	
	2/17/2017 1,203.72	Gas
	3/17/2017 840.96	Gas
	4/14/2017 461.93	Gas
	2/2/2017 2,647.84	Gas
	3/3/2017 2,580.21	Gas
	4/3/2017 2,009.86	Gas
<b>Red Canyon Transit</b>	<b>7,684.00</b>	
	2/2/2017 7,684.00	Subcharter
<b>River City Petro</b>	<b>100,019.43</b>	
	1/30/2017 7,776.29	Fuel
	2/6/2017 9,050.60	Fuel
	2/14/2017 8,187.86	Fuel
	2/21/2017 8,389.59	Fuel
	2/27/2017 9,760.91	Fuel
	2/27/2017 263.96	Fuel
	3/6/2017 11,714.65	Fuel

**PAYMENTS TO CREDITORS WITHIN 90 DAYS PRE-PETITION**

CREDITOR	AMOUNT	PURPOSE
	3/13/2017 4,430.33	Fuel
	3/20/2017 10,470.27	Fuel
	3/27/2017 3,600.60	Fuel
	3/6/2017 271.73	Fuel
	3/13/2017 276.41	Fuel
	4/3/2017 8,573.87	Fuel
	4/10/2017 6,477.97	Fuel
	4/17/2017 6,618.67	Fuel
	4/24/2017 4,155.72	Fuel
<b>Rocky Mt Care Clinic</b>	<b>21,094.00</b>	
	3/17/2017 4,979.00	Employee Testing
	3/9/2017 5,878.00	Employee Testing
	2/9/2017 10,237.00	Employee Testing
<b>Ryans Express</b>	<b>9,785.00</b>	
	3/24/2017 9,785.00	Subcharter
<b>Safety Kleen</b>	<b>19,540.27</b>	
	2/10/2017 1,544.65	vehicle fluid disposal
	3/1/2017 4,188.83	vehicle fluid disposal
	3/9/2017 2,028.32	vehicle fluid disposal
	3/14/2017 1,890.83	vehicle fluid disposal
	3/22/2017 9,887.64	vehicle fluid disposal
<b>Salt Lake Airport</b>	<b>43,174.43</b>	
	3/2/2017 9,995.06	rents
	2/16/2017 35,004.87	AVI charges
<b>Saucon Technologies</b>	<b>11,300.80</b>	
	3/17/2017 1,893.40	Vehicle Tracking
	3/9/2017 3,687.40	Vehicle Tracking
	3/2/2017 5,720.00	Vehicle Tracking
<b>Select Comfort</b>	<b>9,135.00</b>	
	3/2/2017 3,000.00	Building repairs
	3/9/2017 3,000.00	Building repairs
	3/24/2017 3,135.00	Building repairs

**PAYMENTS TO CREDITORS WITHIN 90 DAYS PRE-PETITION**

CREDITOR	AMOUNT	PURPOSE
<b>SIGNATURE FIN</b>	<b>PAYMENT</b>	<b>57,365.85 leases</b>
<b>Smith Power Products</b>	<b>10,058.29</b>	
	2/10/2017	6,198.49 parts
	2/28/2017	3,859.80 parts
<b>Smiths Coaches</b>	<b>13,065.00</b>	
	2/10/2017	5,715.00 subcharter
	2/17/2017	7,350.00 subcharter
<b>Snow, Christensen, Martineau</b>	<b>15,405.00</b>	
	3/1/2017	10,000.00 Legal
	3/1/2017	5,405.00 Legal
<b>SPRINT</b>	<b>7,839.24</b>	
	2/14/2017	2,613.08 cellular phones
	3/15/2017	2,613.08 cellular phones
	4/12/2017	2,613.08 cellular phones
<b>Starline Coaches</b>	<b>20,692.85</b>	
	2/17/2017	5,000.00 subcharter
	2/24/2017	5,000.00 subcharter
	3/2/2017	10,692.85 subcharter
<b>SUNTRUST BANK</b>	<b>LEASE PMT</b>	<b>52,281.39 leases</b>
<b>TCF</b>		<b>23,879.06 leases</b>
<b>Techna Glass</b>	<b>16,638.70</b>	
	2/10/2017	4,554.81 windshields
	2/14/2017	2,298.98 windshields
	2/17/2017	2,510.91 windshields
	2/24/2017	2,244.41 windshields
	2/27/2017	1,417.12 windshields
	3/8/2017	1,956.64 windshields
	3/21/2017	1,655.83 windshields
<b>Teton Stage Lines</b>	<b>20,331.96</b>	
	2/9/2017	10,144.21 Subcharter
	2/24/2017	4,896.25 Subcharter
	3/10/2017	5,291.50 Subcharter

**PAYMENTS TO CREDITORS WITHIN 90 DAYS PRE-PETITION**

CREDITOR	AMOUNT	PURPOSE
<b>THOMAS COLLECT</b>	<b>286,451.51</b>	
2/9/2017	62,288.96	fuel
2/15/2017	762.44	fuel
2/22/2017	67,044.39	fuel
2/24/2017	13,598.27	fuel
3/2/2017	10,485.20	fuel
3/15/2017	4,813.18	fuel
3/15/2017	51,641.30	fuel
3/15/2017	6,708.86	fuel
3/22/2017	1,940.37	fuel
4/5/2017	55,723.17	fuel
4/5/2017	6,060.49	fuel
4/5/2017	5,384.86	fuel
<b>TNT Auctions</b>	<b>24,449.96</b>	<b>Vehicle purchase</b>
<b>Transamerica Ins</b>	<b>7,185.74</b>	
2/6/2017	2,568.04	insurance
3/24/2017	1,847.08	insurance
4/12/2017	2,770.62	insurance
<b>US Dept of Transportation</b>	<b>24,180.00</b>	
2/17/2017	24,180.00	DOT fine
<b>US Fire</b>	<b>129,345.77</b>	
2/23/2017	23,411.35	insurance
3/10/2017	1,581.00	insurance
3/23/2017	32,000.00	insurance
3/23/2017	43,113.62	insurance
4/17/2017	29,239.80	insurance
<b>Ut Dept of Workforce Svc</b>	<b>6,850.25</b>	
3/15/2017	6,850.25	Unemployment tax
<b>UT DMV</b>	<b>2,808.50</b>	
5/1/2017	2,808.50	Vehicle Registration
<b>Utah State Tax Commission</b>	<b>32,722.76</b>	
3/28/2017	32,722.76	vehicle registration

**PAYMENTS TO CREDITORS WITHIN 90 DAYS PRE-PETITION**

CREDITOR	AMOUNT	PURPOSE
<b>WCF OF UTAH</b>	<b>165,937.40</b>	
4/6/2017	76,540.74	insurance
4/26/2017	56,146.12	insurance
4/27/2017	33,250.54	insurance
<b>WEBSTER CAP FIN</b>	<b>16,265.10</b>	leases
<b>WELLS FARGO</b>	<b>LOAN/LEASE</b>	<b>171,378.03</b>
<b>WEX INC</b>	<b>FLEET</b>	<b>73,226.37</b>
2/2/2017	22,140.18	fuel
2/7/2017	2,194.71	fuel
2/13/2017	7,870.74	fuel
2/22/2017	4,031.08	fuel
3/2/2017	9,361.95	fuel
3/7/2017	1,582.06	fuel
3/13/2017	5,524.57	fuel
3/21/2017	5,892.96	fuel
4/4/2017	5,800.65	fuel
4/6/2017	2,277.45	fuel
4/11/2017	5,409.53	fuel
4/21/2017	7,194.71	fuel

**PAYMENTS TO INSIDERS 365 DAYS PRE-FILING  
SALARIES  
(TOTALS)**

Employee Name	Years	Quarters	Pay Date	Data	
				Sum of Gross Pay	Sum of E_BON - Bonus
Bizzaro, Richard	2016			390555.9	0
	2017			206066.72	0
Budisin, Ana	2017			3461.53	0
Cummins, Gordon	2016			138461.4	0
	2017			73076.86	0
Cummins, Laurie	2016			17356.32	0
	2017			9642.4	0
Killingsworth, Larry	2017			7115.38	0
Lahaye, Gordon	2016			8853.9	0
	2017			93.78	0
Quinley, Kaitlin	2016			32846.23	0
	2017			41384.67	500
Grand Total				928915.09	500

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**PAYMENTS TO INSIDERS  
SALARIES  
(BY YEAR)**

Employee Name	Years	Quarters	Pay Date	Data	
				Sum of Gross Pay	Sum of E_BON - Bonus
Bizzaro, Richard	2016	Qtr2	Apr	21697.55	0
			May	43395.1	0
			Jun	43395.1	0
		Qtr3	Jul	43395.1	0
			Aug	43395.1	0
			Sep	65092.65	0
		Qtr4	Oct	43395.1	0
			Nov	43395.1	0
			Dec	43395.1	0
	2017	Qtr1	Jan	43335.1	0
			Feb	43395.1	0
			Mar	65092.65	0
Budisin, Ana	2017	Qtr2	Apr	21697.55	0
			May	32546.32	0
Cummins, Gordon	2016	Qtr2	May	3461.53	0
Cummins, Gordon	2016	Qtr2	Apr	7692.3	0
			May	15384.6	0
			Jun	15384.6	0
		Qtr3	Jul	15384.6	0
			Aug	15384.6	0
			Sep	23076.9	0
		Qtr4	Oct	15384.6	0
			Nov	15384.6	0
			Dec	15384.6	0
	2017	Qtr1	Jan	15384.6	0
			Feb	15384.6	0
			Mar	23076.9	0
Cummins, Laurie	2016	Qtr2	Apr	7692.3	0
			May	11538.46	0
		Qtr3	Apr	964.24	0
			May	1928.48	0
			Jun	1928.48	0
		Qtr4	Jul	1928.48	0
			Aug	1928.48	0
			Sep	2892.72	0
		Qtr4	Oct	1928.48	0
			Nov	1928.48	0
			Dec	1928.48	0
	2017	Qtr1	Jan	1928.48	0
			Feb	1928.48	0
			Mar	2892.72	0
Killingsworth, Larry	2017	Qtr2	Apr	1928.48	0
			May	964.24	0
Lahaye, Gordon	2016	Qtr2	May	7115.38	0
			Jun	1572.11	0
		Qtr3	Jul	299.35	0
			Aug	272.64	0
			Sep	1542.61	0
		Qtr4	Sep	2011.6	0
			Oct	2306.46	0
			Oct	849.13	0
		Qtr1	Jan	93.78	0
			Feb	0	0
Quinley, Kaitlin	2016	Qtr3	Sep	10915.41	0
			Oct	7276.94	0
		Qtr4	Nov	7376.94	0
			Dec	7276.94	0
	2017	Qtr1	Jan	7276.94	0
			Feb	7276.94	0
		Qtr2	Mar	12984.63	500
			Apr	8846.16	0
<b>Grand Total</b>				<b>928915.09</b>	<b>500</b>

**PAYMENTS TO INSIDERS  
SALARIES  
(DETAILS)**

<b>Employee Name</b>	<b>Pay Date</b>	<b>Gross Pay</b>	<b>Regular Earnings</b>	<b>OT Earnings</b>	<b>Net Pay</b>	<b>E_BON - Bonus</b>
Bizzaro, Richard	04/28/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	05/12/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	05/26/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	06/09/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	06/23/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	07/07/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	07/21/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	08/04/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	08/18/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	09/01/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	09/15/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	09/29/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	10/13/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	10/27/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	11/10/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	11/23/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	12/08/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	12/22/2016	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	01/05/2017	21,637.55	21,637.55	0.00	0.00	0.00
Bizzaro, Richard	01/19/2017	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	02/02/2017	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	02/16/2017	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	03/02/2017	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	03/16/2017	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	03/30/2017	21,697.55	21,697.55	0.00	14,992.66	0.00
Bizzaro, Richard	04/13/2017	21,697.55	21,697.55	0.00	0.00	0.00
Bizzaro, Richard	05/11/2017	16,273.16	16,273.16	0.00	11,790.19	0.00
Bizzaro, Richard	05/11/2017	16,273.16	16,273.16	0.00	0.00	0.00
Budisin, Ana	05/11/2017	3,461.53	3,461.53	0.00	0.00	0.00
Cummins, Gordon	04/28/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	05/12/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	05/26/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	06/09/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	06/23/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	07/07/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	07/21/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	08/04/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	08/18/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	09/01/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	09/15/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	09/29/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	10/13/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	10/27/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	11/10/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	11/23/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	12/08/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	12/22/2016	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	01/05/2017	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	01/19/2017	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	02/02/2017	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	02/16/2017	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	03/02/2017	7,692.30	7,692.30	0.00	0.00	0.00

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**PAYMENTS TO INSIDERS**  
**SALARIES**  
**(DETAILS)**

Cummins, Gordon	03/16/2017	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	03/30/2017	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	04/13/2017	7,692.30	7,692.30	0.00	0.00	0.00
Cummins, Gordon	05/11/2017	5,769.23	5,769.23	0.00	4,202.78	0.00
Cummins, Gordon	05/11/2017	5,769.23	5,769.23	0.00	0.00	0.00
Cummins, Laurie	04/28/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	05/12/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	05/26/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	06/09/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	06/23/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	07/07/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	07/21/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	08/04/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	08/18/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	09/01/2016	0.00	0.00	0.00	148.80	0.00
Cummins, Laurie	09/01/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	09/15/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	09/29/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	10/13/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	10/27/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	11/10/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	11/23/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	12/08/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	12/22/2016	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	01/05/2017	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	01/19/2017	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	02/02/2017	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	02/16/2017	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	03/02/2017	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	03/16/2017	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	03/30/2017	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	04/13/2017	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	04/27/2017	964.24	964.24	0.00	0.00	0.00
Cummins, Laurie	05/11/2017	964.24	964.24	0.00	0.00	0.00
Killingsworth, Larry	05/11/2017	7,115.38	7,115.38	0.00	0.00	0.00
Lahaye, Gordon	04/28/2016	299.35	161.60	0.00	0.00	0.00
Lahaye, Gordon	05/12/2016	272.64	101.84	0.00	0.00	0.00
Lahaye, Gordon	06/09/2016	244.53	135.44	0.00	0.00	0.00
Lahaye, Gordon	06/23/2016	1,327.58	501.04	123.24	0.00	0.00
Lahaye, Gordon	07/07/2016	615.40	315.20	0.00	0.00	0.00
Lahaye, Gordon	07/21/2016	885.21	427.20	11.04	0.00	0.00
Lahaye, Gordon	07/21/2016	42.00	42.00	0.00	0.00	0.00
Lahaye, Gordon	08/04/2016	1,108.75	629.20	35.40	0.00	0.00
Lahaye, Gordon	08/18/2016	857.35	459.84	0.00	0.00	0.00
Lahaye, Gordon	08/18/2016	45.50	45.50	0.00	0.00	0.00
Lahaye, Gordon	09/01/2016	658.89	391.04	0.00	0.00	0.00
Lahaye, Gordon	09/15/2016	541.66	334.56	0.00	0.00	0.00
Lahaye, Gordon	09/29/2016	1,105.91	628.16	10.56	0.00	0.00
Lahaye, Gordon	10/13/2016	849.13	467.84	44.04	0.00	0.00
Lahaye, Gordon	01/19/2017	93.78	73.78	0.00	0.00	0.00
Quinley, Kaitlin	09/01/2016	3,638.47	3,638.47	0.00	0.00	0.00
Quinley, Kaitlin	09/15/2016	3,638.47	3,638.47	0.00	0.00	0.00
Quinley, Kaitlin	09/29/2016	3,638.47	3,638.47	0.00	0.00	0.00

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**PAYMENTS TO INSIDERS  
SALARIES  
(DETAILS)**

Quinley, Kaitlin	10/13/2016	3,638.47	3,638.47	0.00	0.00	0.00
Quinley, Kaitlin	10/27/2016	3,638.47	3,638.47	0.00	0.00	0.00
Quinley, Kaitlin	11/10/2016	3,638.47	3,638.47	0.00	0.00	0.00
Quinley, Kaitlin	11/23/2016	3,738.47	3,638.47	0.00	0.00	0.00
Quinley, Kaitlin	12/08/2016	3,638.47	3,638.47	0.00	0.00	0.00
Quinley, Kaitlin	12/22/2016	3,638.47	3,638.47	0.00	0.00	0.00
Quinley, Kaitlin	01/05/2017	3,638.47	3,638.47	0.00	0.00	0.00
Quinley, Kaitlin	01/19/2017	3,638.47	3,638.47	0.00	0.00	0.00
Quinley, Kaitlin	02/02/2017	3,638.47	3,638.47	0.00	0.00	0.00
Quinley, Kaitlin	02/16/2017	3,638.47	3,638.47	0.00	0.00	0.00
Quinley, Kaitlin	03/02/2017	4,138.47	3,638.47	0.00	0.00	500.00
Quinley, Kaitlin	03/16/2017	4,423.08	4,423.08	0.00	0.00	0.00
Quinley, Kaitlin	03/30/2017	4,423.08	4,423.08	0.00	2,931.35	0.00
Quinley, Kaitlin	04/13/2017	4,423.08	4,423.08	0.00	0.00	0.00
Quinley, Kaitlin	04/27/2017	4,423.08	4,423.08	0.00	0.00	0.00
Quinley, Kaitlin	05/11/2017	5,000.00	5,000.00	0.00	0.00	0.00

# PAYMENTS TO INSIDERS

## RICHARD BIZZARO

**PAYMENTS TO INSIDERS**  
**fbo RICHARD BIZZARO**

**Payments made On behalf of Richard Bizzaro for caregivers from April 2016 to April 2017**

Recipient	Document	Date	Document No.	Amount
Laszlo Bihari	Payment	4/8/2016	00000000000020815	999.22
Laszlo Bihari	Payment	4/13/2016	ACH	952.63
Laszlo Bihari	Payment	4/20/2016	ACH	725.00
Laszlo Bihari	Payment	4/26/2016	ACH	867.35
Laszlo Bihari	Payment	5/4/2016	ACH	450.00
Laszlo Bihari	Payment	5/10/2016	ACH	782.02
Laszlo Bihari	Payment	5/17/2016	ACH	867.50
Laszlo Bihari	Payment	5/26/2016	ACH	893.75
Laszlo Bihari	Payment	6/1/2016	00000000000021843	464.92
Laszlo Bihari	Payment	6/7/2016	ACH	852.26
Laszlo Bihari	Payment	6/14/2016	00000000000021990	950.98
Laszlo Bihari	Payment	6/21/2016	00000000000022051	888.56
Laszlo Bihari	Payment	6/29/2016	00000000000022136	906.70
Laszlo Bihari	Payment	7/6/2016	00000000000022208	961.99
Laszlo Bihari	Payment	7/19/2016	00000000000022347	919.55
Laszlo Bihari	Payment	7/26/2016	ACH	954.70
Laszlo Bihari	Payment	8/2/2016	00000000000022507	856.32
Laszlo Bihari	Payment	8/11/2016	00000000000022628	966.73
Laszlo Bihari	Payment	8/17/2016	CASH	1,155.25
Laszlo Bihari	Payment	8/25/2016	00000000000022970	880.00
Laszlo Bihari	Payment	8/30/2016	00000000000023037	912.52
Laszlo Bihari	Payment	9/7/2016	ACH	1,273.95
Laszlo Bihari	Payment	9/14/2016	ACH	981.47
Laszlo Bihari	Payment	9/20/2016	00000000000023248	1,318.07
Laszlo Bihari	Payment	9/27/2016	ACH	985.44
Laszlo Bihari	Payment	10/5/2016	CASH	900.00
Laszlo Bihari	Payment	10/12/2016	ACH	1,019.68
Laszlo Bihari	Payment	10/18/2016	ACH	762.50
Laszlo Bihari	Payment	10/25/2016	ACH	933.98
Laszlo Bihari	Payment	11/2/2016	00000000000023782	1,125.00
Laszlo Bihari	Payment	11/9/2016	00000000000023846	1,378.16
Laszlo Bihari	Payment	11/15/2016	00000000000023943	1,800.00
Laszlo Bihari	Payment	11/23/2016	00000000000024039	1,069.51
Laszlo Bihari	Payment	11/29/2016	00000000000024079	900.00
Laszlo Bihari	Payment	12/6/2016	00000000000024141	1,430.00
Laszlo Bihari	Payment	12/13/2016	00000000000024203	1,247.17
Laszlo Bihari	Payment	12/20/2016	00000000000024257	1,350.00

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Laszlo Bihari

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**PAYMENTS TO INSIDERS  
fbo RICHARD BIZZARO**

<b>Recipient</b>	<b>Document</b>	<b>Date</b>	<b>Document No.</b>	<b>Amount</b>
Laszlo Bihari	Payment	12/28/2016	00000000000024327	1,060.86
Laszlo Bihari	Payment	1/5/2017	0000000000000466	923.55
Laszlo Bihari	Payment	1/11/2017	0000000000000496	1,393.01
Laszlo Bihari	Payment	1/18/2017	0000000000000504	900.00
Laszlo Bihari	Payment	1/24/2017	0000000000000540	1,083.13
Laszlo Bihari	Payment	1/31/2017	0000000000000559	927.18
Laszlo Bihari	Payment	2/8/2017	0000000000000593	1,340.00
Laszlo Bihari	Payment	2/15/2017	0000000000000619	1,006.10
Laszlo Bihari	Payment	2/22/2017	0000000000000647	1,085.06
Laszlo Bihari	Payment	2/28/2017	0000000000000764	1,191.90
Laszlo Bihari	Payment	3/7/2017	0000000000000985	1,403.94
Laszlo Bihari	Payment	3/15/2017	0000000000001012	932.84
Laszlo Bihari	Payment	3/22/2017	0000000000001036	900.00
Laszlo Bihari	Payment	3/28/2017	0000000000001073	1,069.64
Laszlo Bihari	Payment	4/4/2017	0000000000001123	1,790.00
Laszlo Bihari	Payment	4/17/2017	0000000000001211	1,702.88
Laszlo Bihari	Payment	4/18/2017	0000000000001241	909.98
Laszlo Bihari	Payment	4/28/2017	0000000000001318	1,008.00
			<b>Total:</b>	<b>57,310.95</b>

*NOTE: All Payments are for caregiver services and any reimbursement of minimal expenses*

**PAYMENTS TO INSIDERS**  
**fbo RICHARD BIZZARO**

**Payments made on behalf of Richard Bizzaro for caregivers from April 2016 to April 2017**

<b>Recipient</b>	<b>Date</b>	<b>Document No.</b>	<b>Amount</b>
Gayos, Antonia	6/22/2016	ACH	2,400.00
Gayos, Antonia	6/28/2016	00000000000022230	4,800.00
Gayos, Antonia	7/12/2016	00000000000022270	2,400.00
Gayos, Antonia	7/26/2016	00000000000022416	2,400.00
Gayos, Antonia	8/12/2016	00000000000022756	2,400.00
Gayos, Antonia	8/26/2016	00000000000023011	2,400.00
Gayos, Antonia	9/13/2016	00000000000023396	2,400.00
Gayos, Antonia	9/23/2016	00000000000023282	4,800.00
Gayos, Antonia	10/21/2016	00000000000023558	2,400.00
Gayos, Antonia	11/3/2016	00000000000023786	2,400.00
Gayos, Antonia	11/15/2016	00000000000023940	2,400.00
Gayos, Antonia	11/29/2016	00000000000024080	2,400.00
Gayos, Antonia	12/13/2016	00000000000024227	2,400.00
Gayos, Antonia	12/27/2016	00000000000024319	2,400.00
Gayos, Antonia	1/11/2017	0000000000000958	2,400.00
Gayos, Antonia	1/24/2017	0000000000001155	2,400.00
Gayos, Antonia	2/9/2017	0000000000000966	2,400.00
Gayos, Antonia	2/22/2017	0000000000001157	2,400.00
Gayos, Antonia	3/13/2017	0000000000001001	2,400.00
Gayos, Antonia	3/23/2017	0000000000001043	2,400.00
Gayos, Antonia	4/4/2017	0000000000001125	2,400.00
Gayos, Antonia	4/24/2017	0000000000001284	2,400.00
		<b>Total Payments:</b>	<b>57,600.00</b>

**PAYMENTS TO INSIDERS**

**RICHARD BIZZARO, JR.**

**Payments made in behalf of Richard Bizzaro for Ricky's Bizzaro's rent from April 2016 to April 2017**

<b>Recipient</b>	<b>Date</b>	<b>Purpose</b>	<b>Amount</b>
Bizzaro Rick Jr	11/1/2016	Pc Rent 2016	1,250.00
Bizzaro Rick Jr	1/1/2017	Jan Rent	1,250.00
Frankie Lynn Ford Revocable Trust	2/3/2017	Feb Rent	1,250.00
Frankie Lynn Ford Revocable Trust	3/1/2017	March Rent	1,250.00
Frankie Lynn Ford Revocable Trust	4/1/2017	April Rent	1,250.00
		<b>Total:</b>	<b>6,250.00</b>

*NOTE: Rent paid to use apartment for visits to SL*

**PAYMENTS TO INSIDERS**  
**GORDON CUMMINS**

<b>Recipient</b>	<b>Type</b>	<b>Date</b>	<b>Amount</b>	<b>Purpose</b>
Cummins, Gordo	Payment	1/31/2017	5,000.00	
Cummins, Gordo	Payment	1/21/2017	2,224.50	
Cummins, Gordo	Payment	10/3/2016	35,945.88	
Cummins, Gordo	Invoice	9/1/2016	543.31	Reimbursement
Cummins, Gordo	Invoice	9/1/2016	543.31	Reimbursement
Cummins, Gordo	Invoice	6/30/2016	100,060.00	Sale of DVIP
Cummins, Gordo	Payment	7/8/2016	1,200.00	
Cummins, Gordo	Invoice	6/29/2016	1,200.00	
Cummins, Gordo	Invoice	6/16/2016	1,200.00	
Cummins, Gordo	Invoice	6/1/2016	1,200.00	
Cummins, Gordo	Invoice	5/19/2016	1,200.00	
Cummins, Gordo	Invoice	5/5/2016	1,200.00	
Cummins, Gordo	Invoice	4/22/2016	1,200.00	
Cummins, Gordo	Invoice	4/8/2016	1,200.00	
<b>TOTAL</b>			<b>153,917.00</b>	

**PAYMENTS TO INSIDERS**  
**J.L. "LARRY" KILLINGSWORTH**

<b>Recipient</b>	<b>Type</b>	<b>Date</b>	<b>Purpose</b>	<b>Amount</b>
Kima Consulting LLC	Invoice	4/17/2017	CONSULTING 4/17.1	8,815.73
Kima Consulting LLC	Invoice	4/3/2017	CONSULTING 4/17	8,815.73
Kima Consulting LLC	Invoice	3/20/2017	CONSULTING 3/20	8,815.73
Kima Consulting LLC	Invoice	3/6/2017	CONSULTING 25	8,815.73
Kima Consulting LLC	Invoice	2/20/2017	CONSULTING 2/20/17	8,815.73
Kima Consulting LLC	Invoice	2/1/2017	CONSULTING 01/30	8,815.73
Killingsworth Larry Reimbursements	Invoice	2/1/2017	ANY HOUR SERVICE REIMB	6,723.00
Kima Consulting LLC	Invoice	1/23/2017	CONSULTING 01/16	8,815.73
Kima Consulting LLC	Invoice	1/9/2017	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	1/9/2017	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	12/26/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	12/12/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	11/28/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	11/14/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	10/31/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	10/17/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	10/3/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	9/19/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	9/19/2016	DUMMY INV. 2	8,815.73
Kima Consulting LLC	Invoice	9/5/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	9/5/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	9/5/2016	DUMMY INV. 1	8,815.73
Kima Consulting LLC	Invoice	8/22/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	8/8/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	7/25/2016	CONSULTING 2016.	8,815.73
Kima Consulting LLC	Invoice	7/11/2016	CONSULTING 2016.	8,815.73
Kima Consulting LLC	Invoice	6/27/2016	CONSULTING 2016.	8,815.73
Kima Consulting LLC	Invoice	6/13/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	6/1/2016	LK EXPENSES 02/2016	5,211.47
Kima Consulting LLC	Invoice	5/30/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	5/26/2016	ANA REIMB	1,923.08
Kima Consulting LLC	Invoice	5/16/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	5/10/2016	LK EXP REIMB 05/2016	108.96
Kima Consulting LLC	Invoice	5/2/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	5/2/2016	EXP ADVANCE - MOVE TO PARK CITY	10,000.00
Kima Consulting LLC	Invoice	5/1/2016	EXP REIMB 01/2016.1	5,098.15
Kima Consulting LLC	Invoice	4/19/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	4/5/2016	CONSULTING 2016	8,815.73
Kima Consulting LLC	Invoice	4/4/2016	2015 BONUS.1	15,000.00
Kima Consulting LLC	Invoice	4/1/2016	COSTCO FOOD	106.83
			<b>TOTAL</b>	<b>326,274.85</b>

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**PAYMENTS TO INSIDERS**  
**ANA BUDISIN**

All Resort Group, Inc  
Case Number: 17-23687  
History of Income

<b>Vendor Name</b>	<b>Document Type</b>	<b>Document Date</b>	<b>Document Amount</b>
Budisin, Ana	Payment	4/4/2017	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	3/22/2017	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	3/7/2017	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	2/22/2017	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	2/9/2017	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	1/24/2017	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	1/11/2017	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	1/11/2017	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	1/3/2017	\$ 4,220.43 Reimbursement
Budisin, Ana	Payment	12/27/2016	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	12/13/2016	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	11/29/2016	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	11/15/2016	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	11/1/2016	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	10/18/2016	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	10/10/2016	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	9/30/2016	\$ 7,911.50 Consulting Fees
Budisin, Ana	Payment	9/27/2016	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	9/6/2016	\$ 3,846.16 Consulting Fees
Budisin, Ana	Payment	8/9/2016	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	7/27/2016	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	7/15/2016	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	6/28/2016	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	6/16/2016	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	6/1/2016	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	5/19/2016	\$ 1,923.08 Consulting Fees
Budisin, Ana	Payment	5/3/2016	\$ 4,807.70 Consulting Fees
			\$ 65,016.63

**PAYMENTS TO INSIDERS  
GORDON LA HAYE**

<b>Recipient</b>	<b>Method</b>	<b>Date</b>	<b>Amount</b>	<b>Purpose</b>
Commercial Portfolio Advisors	Payment	4/5/2017	\$ 5,200.00	Consulting Fees
Commercial Portfolio Advisors	Payment	3/22/2017	\$ 1,200.00	Consulting Fees
Commercial Portfolio Advisors	Payment	3/6/2017	\$ 1,200.00	Consulting Fees
Commercial Portfolio Advisors	Payment	2/24/2017	\$ 5,000.00	Consulting Fees
Commercial Portfolio Advisors	Payment	2/21/2017	\$ 1,200.00	Consulting Fees
Commercial Portfolio Advisors	Payment	2/14/2017	\$ 1,200.00	Consulting Fees
Commercial Portfolio Advisors	Payment	2/2/2017	\$ 3,806.25	Consulting Fees
Commercial Portfolio Advisors	Payment	1/26/2017	\$ 4,781.25	Consulting Fees
Commercial Portfolio Advisors	Payment	1/11/2017	\$ 6,168.75	Consulting Fees
Commercial Portfolio Advisors	Payment	12/19/2016	\$ 6,300.00	Consulting Fees
Commercial Portfolio Advisors	Payment	11/15/2016	\$ 6,562.50	Consulting Fees
Commercial Portfolio Advisors	Payment	11/1/2016	\$ 4,725.00	Consulting Fees
LaHaye, Gordon	Payment	9/19/2016	\$ 10.00	reimbursements
LaHaye, Gordon	Payment	9/7/2016	\$ 18.00	reimbursements
LaHaye, Gordon	Payment	8/2/2016	\$ 8.00	reimbursements
LaHaye, Gordon	Payment	3/8/2016	\$ 139.13	reimbursements
			\$ 47,518.88	

**PAYMENTS TO INSIDERS  
DONNIE NOVELLE**

<b>Vendor Name</b>	<b>Document Type</b>	<b>Document Date</b>	<b>Document Numbr</b>	<b>Document Amount</b>	
Novelle, Donnie	Payment	3/17/2017	100000291	\$ 750.00	Reimbursement
Novelle, Donnie	Payment	11/9/2016	ACH	\$ 250.00	Reimbursement
				\$ 1,000.00	

**PAYMENTS TO INSIDERS**  
**KAITY QUINLEY**

<b>Recipient</b>	<b>Type</b>	<b>Date</b>	<b>Amount</b>	<b>Purpose</b>
Quinley, Kaity	Payment	3/7/2017	\$ 10,000.00	Reimbursment
Quinley, Kaity	Payment	1/17/2017	\$ 5,000.00	Reimbursment
Quinley, Kaity	Payment	12/7/2016	\$ 10,000.00	Reimbursment
Quinley, Kaity	Payment	9/23/2016	\$ 10,000.00	Reimbursment
Quinley, Kaity	Payment	9/13/2016	\$ 21.65	Reimbursment
Quinley, Kaity	Payment	9/13/2016	\$ 7.00	Reimbursment
Quinley, Kaity	Payment	9/13/2016	\$ 13.93	Reimbursment
Quinley, Kaity	Payment	9/13/2016	\$ 50.00	Reimbursment
Quinley, Kaity	Payment	9/13/2016	\$ 55.70	Reimbursment
Quinley, Kaity	Payment	8/11/2016	\$ 620.00	Reimbursment
Quinley, Kaity	Payment	5/13/2016	\$ 9,996.62	Reimbursment
Quinley, Kaity	Payment	4/18/2016	\$ 10,000.00	Reimbursment
			\$ 55,764.90	

**PAYMENTS TO INSIDERS**  
**FRANK SUITTER**

<b>Vendor Name</b>	<b>Type</b>	<b>Date</b>	<b>Amount</b>	<b>Purpose</b>
Frank Suitter Law Office, PLLC	Invoice	4/3/2017	\$ 5,000.00	Board Fees
Frank Suitter Law Office, PLLC	Invoice	3/1/2017	\$ 5,000.00	Board Fees
Frank Suitter Law Office, PLLC	Invoice	2/1/2017	\$ 5,000.00	Board Fees
Frank Suitter Law Office, PLLC	Invoice	1/3/2017	\$ 5,000.00	Board Fees
Frank Suitter Law Office, PLLC	Invoice	12/1/2016	\$ 5,000.00	Board Fees
Frank Suitter Law Office, PLLC	Invoice	11/4/2016	\$ 5,000.00	Board Fees
Frank Suitter Law Office, PLLC	Invoice	10/3/2016	\$ 5,000.00	Board Fees
Frank Suitter Law Office, PLLC	Invoice	9/1/2016	\$ 5,000.00	Board Fees
Frank Suitter Law Office, PLLC	Invoice	8/1/2016	\$ 5,000.00	Board Fees
Frank Suitter Law Office, PLLC	Invoice	7/1/2016	\$ 5,000.00	Board Fees
Frank Suitter Law Office, PLLC	Invoice	6/1/2016	\$ 5,000.00	Board Fees
Frank Suitter Law Office, PLLC	Invoice	5/1/2016	\$ 5,000.00	Board Fees
Frank Suitter Law Office, PLLC	Invoice	4/1/2016	\$ 5,000.00	Board Fees
			\$	65,000.00